10 questions pertaining to Tuberculosis

1). Persistent and productive cough, weight loss, bloody sputum, night sweats, fever, and anorexia are common symptoms of TB infection.
   a). True
   b). False

2). A person with latent TB is not contagious.
   a). True
   b). False

3). TB is spread through skin to skin contact with an infected individual.
   a). True
   b). False

4). Individuals employed in non-clinical positions at non-clinical work sites are at equal risk of contacting TB as individuals working in a clinical setting.
   a). True
   b). False

5). Quantiferon Gold is not subject to reader bias in the interpretation of positive or negative results.
   a). True
   b). False

6). Prior BCG vaccination can produce a false positive result if Quantiferon Gold testing is used.
   a). True
   b). False

7). When calling occupational health to report a confirmed case of TB, it is important to provide the patient’s current demographic data to department staff.
   a). True
   b). False

8). If an individual has a positive Quantiferon Gold TB test, then they should never have the test repeated again and are required to have chest x-rays.
   a). True
   b). False
9). When a clinic patient is suspected of being infected with TB, clinic staff should give the patient an N-95 respirator mask to wear.  
a). True  
b). False

10). Clinics should have particulate masks available for patients as a means to decrease the spread of airborne infections.  
a). True  
b). False

10 questions pertaining to Standard Precautions

11. Which patient(s) should be in a private room? Choose all that apply.  
A. A pt with suspected Tuberculosis  
B. A pt with poor hygiene  
C. A pt with MRSA  
D. A pt with disseminated shingles

12. Which patients can be put in a semiprivate room together? Choose all that apply.  
A. A pt with VRE  
B. A pt who is HIV positive  
C. A pt with VRE and possible Urinary Sepsis  
D. None of the above.

13. Standard Precautions include all of the following, except:  
A. Use of sterile gloves when possibly coming in contact with blood or bodily fluids  
B. Use of gowns if clothing is likely to be soiled  
C. Protective eyewear during procedures that may produce splattering.  
D. Masks when within 3 feet of a pt on droplet precautions

14. When transporting a pt on standard precautions, one should:  
A. Don any protective barrier per protocol before entering room and remove before leaving room.  
B. Don the pt with any protective barrier per protocol to protect visitors  
C. If a productive cough is present, have pt wear a mask.  
D. All of the above

15. Actual exposure to blood or body substances include includes all of the following except:  
A. Parenteral  
B. Mucous membrane  
C. Skin contact (unbroken skin)  
D. All the above is considered actual exposure

16. Which two pts can room together?  
A. A pt that is HIV positive and pt suspected pneumonia
B. A pt with TB and a pt with pneumonia  
C. A pt with VRE and a pt with MRSA  
D. A pt recovering from a heart attack and a pt with HIV

17. With regards to disposing of sharps, the following is correct. Choose all that apply.  
A. Avoid rushing when handling needles and sharps.  
B. In the event recapping is unavoidable, the two finger scoop technique or a needle recapping device should be used.  
C. Dispose of all needles and other sharps promptly.  
E. Be sure to place sharps in red containers and dispose of them in trash containers marked “Biohazard” with red liners.

18. Food service may deliver food trays to all of the following except:  
A. A pt diagnosed with suspected TB  
B. A pt diagnosed with chickenpox  
C. A pt diagnosed with Herpes Zoster  
D. Food service may not deliver food to any of the above

19. Which of the following is true regarding standard precautions and an emergency situation. Choose all that apply:  
A. As an absolute minimum, personnel responding to a medical emergency are required to wear gloves when in contact with blood and body substances.  
B. Even in emergency situations, health care professionals have the responsibility to protect themselves from exposure to potentially infectious blood and body substances.  
C. Manual respiratory resuscitation equipment is available as standard equipment on emergency carts.  
D. Other barrier protection should be put on as time permits or when other personnel become available to assist.

20. As per standard precaution and patient placement guidelines:  
A. A private room is not necessary until TB is confirmed  
B. A private room is necessary for a weakened immune system with WBC less than 2.9 L/ DL  
C. A private room is necessary if blood or bodily fluids can not be contained.  
D. A private room is necessary for a pt with a chronic productive cough due to unknown origins.

10 questions pertaining to Airborne Precautions

21. Airborne precautions are used for the following diseases. Choose all that apply:  
A. Pneumonia  
B. TB  
C. Chicken Pox  
D. Shingles  
E. Measles
22. Explain the difference between a private room and a negative pressure private room.

_________________________________________________________________
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23. All of the following are used as criteria when diagnosing a suspected TB case except:
A. A cough 2 weeks or greater
B. A WBC count of 15,000 l/ dl (high)
C. Infiltrate on chest x-ray
D. Known history of TB or positive TB

24. Who can initiate Airborne Precaution procedures? Choose all that apply:
A. Infection Control Personnel
B. The Attending Physician
C. The Nurse
D. Only a Expert Specialist

25. A pt comes into the hospital with a productive cough lasting more than 2 weeks, you suspect TB. With whom can this pt share a room with?
A. A pt being treated for TB
B. A pt being treated for chicken pox
C. A pt being treated for measles
D. None of the above

26. A 12 year old pt is being hospitalized for chicken pox. Upon discharge, he/she understands that he may return to school:
A. 2 days after being discharged from the hospital
B. If no more lesions appear
C. Once the lesions are crusted over
D. Once he/she is off Airborne Precautions

27. When discontinuing Airborne Precautions, if a difference of opinion arises, the doctor is ultimately held responsible.
A. True
B. False
C. 

28. People on Airborne Precautions also must be on Standard Precautions. People with Chicken Pox or shingles must also be on ________________________________ Precautions.

29. A pt is in the hospital with TB. Which of these visitors may NOT visit regardless of precautions they may don? Choose all that apply.
A. A brother has a known history of TB, but three days ago his PPD was
negative.
B. A daughter is bringing her 2 month old to see grandpa.
C. A wife has TB of the same bacterial microorganism.
D. A friend who claims he has not been ill for 2 years.

30. A child is permitted to visit someone on airborne precaution if, choose all that apply:
A. Is not at risk to contract the disease (i.e., is immune to the disease).
B. Is not ill or has not been recently exposed to a communicable disease (e.g. influenza).
C. Is able to understand and comply with isolation procedures.
E. All the above are correct.

10 questions pertaining to Droplet Precautions

31. A 6 month old presents to the unit with a diagnosis of RSV. You are the nursing manager. What should you do?
A. Place the child in a private room with negative air pressure per CDC Guidelines
B. Place the child in a semi private room with another child being treated for RSV on standard precautions per CDC Guidelines.
C. Place the child in a private room on droplet precautions and contact precautions per CDC Guidelines.
D. Due to the child’s age, no special measures need to be taken per CDC guidelines.

32. Which of the following statements is true about Droplet Precautions?
A. A private room is sufficient
B. The door of the pts room must remain closed except to enter and exit
C. One must don a mask before entering the room
D. None of the above is correct

33. Droplet precautions are required when coming in close contact with which of the following?
A. Potentially droplets of urine from a pt with urinary sepsis
B. Potentially droplets of mucus from a pt with bronchitis
C. Potentially droplets of blood from a pt with HIV
D. All the above is correct

34. Which individual entered the room correctly with a pt on droplet precautions? Choose all that apply:
A. Food service personnel put on a mask and gloves from inside the pts room to deliver the food tray or nutritional supplement.
B. The Nurse open and shut the door behind her and wore a mask when coming within 3 feet of the pt and wore gloves upon contact.
C. Housekeeping wore a mask and gloves from inside the pts room but left the door open upon exiting.
D. A visitor put a mask and gloves on from inside the pts room, the nurse sees them from the hallway and smiles

35. All of the following is true about transporting a pt on droplet precautions except:
A. The transporting services must don a mask and gloves when transporting the pt
B. The pt must wear a mask
C. All Ancillary Department employees must wear masks
D. It is the responsibility of the unit to call ahead before the pt is transported

36. A high school teenager presents to the ER meningitis. At 3:20 p.m IV antibiotic therapy is started immediately and he eventually makes his way to your unit. You know the droplet precautions can be discontinued when:
A. He has been on the antibiotic therapy for 24 hours.
B. 24 hours after showing improvement with the IV therapy.
C. When the physician discharges him
D. When the Infection Control Representative clears him

37. Fill in the blank:
A person on droplet precautions also requires __________________________ precautions

38. Which pts should be on droplet precautions? Choose all that apply:
A. A 69 year old male being treated for pneumonia
B. A 16 year old being treated for meningitis
C. A 9 month old being treated for RSV
D. A 10 year old being treated for mumps
F. A 49 year old being treated for a broken leg and the common flu

39. Which of the following individuals may initiate droplet precautions? Choose all that apply:
A. The attending physician
B. The nurse
C. The Infection Control Representative
D. All of the above

40. A 70 year old presents to the hospital with influenza. With whom can you place this individual?
A. A 18 year old being treated for meningitis
B. A 29 year old being treated for influenza and a rash of unknown origin
C. A 69 year old being treated for influenza and a fractured hip
D. A 70 year old being treated for pneumonia

10 questions pertaining to Contact Precautions

41. The difference between Standard Precautions and Contact Precautions includes the following. Check all that apply:
A. There is no difference
B. Standard precautions are the same as universal precautions
C. Standard precautions are disease specific whereas, contact precautions are pt. specific.
D. All the above
42. You are on the Pediatric Unit of your hospital. As the nurse manager, you have 4 admissions to your unit all under the age of five years of age. You are running out of private rooms. Which pts can room together?
A. A 3 year old male with scabies and a 3 year old girl with scabies. They both have the same bacterial microorganism.
B. A 6 month old with scabies and a 6 month old with impetigo.
C. A 5 year old with RSV and a history of pneumonia and a 5 year old with RSV and a history of influenza
D. None of the above

43. Fill in the blank:
The Two Agencies that govern hospital policies with regard to infection control are The Healthcare Infection Control Practices Advisory Committee (HICPAC) and ____________________________.

44. Label each of these D (Direct) or I [Indirect] mode of transmission. Both D and I can apply:
A. A friend kisses a child on the mouth. A few weeks later, the child develops Herpes Simplex A around her lips. ______________________
B. A Registered Nurse is working in a long term care facility for the first time, she develops scabies but has no idea when, where or how long she has had the manifestations of this skin disorder. ______________________
C. A coworker has a cold and you have a cold as well. ______________________
D. You are a correctional facility nurse and one individual has MRSA. Over the next few months, 2 other prisoners develop the same strain of the MRSA infection. ______________________

45. Respiratory Hygiene/ Cough Etiquette includes all of the following except:
A. Instruct pt not to sneeze around persons not infected.
B. Cover the nose/ mouth when coughing or sneezing.
C. Use tissues to contain respiratory secretions and dispose of them in the nearest waste receptacle after use.
D. Perform hand hygiene after having contact with respiratory secretions and contaminated objects/ materials.

46. The proper sequence of precautions for taking care of a pt on Infection Control Precautions are as follows:
1) Wash hands upon completion
2). Care for pt
3). Don mask/ gown/ gloves
4). Enter Room
5). Remove mask/ gown/ gloves

47. What type of precaution is used with persons that have Cytomegalovirus
infection?
A. Standard precautions
B. Contact precautions
C. Droplet precautions
D. Airborne precautions

48. What illness/disease process requires the use of disposable dish ware according to the center for disease control guidelines? Choose all that apply:
A. Tuberculosis
B. MRSA (methicillin-resistant Staphylococcus aureus).
C. Meningitis
D. Chicken pox

49. What are the symptoms of Acinetobacter infection caused by pneumonia? Choose all that apply:
1. Fever
2. Chills
3. Sneezing
4. Congestion
5. Cough
6. Runny Nose

50. When caring for someone on “Contact Isolation”. The following is true. 2 part answers must be entirely correct. Check all that apply:

1. Wear gloves for all contact with the patient, the patient's bedside equipment, and the patient's environment.
   a. Change gloves between distinctive tasks (e.g. wound care, perineal care, suctioning).
   b. Gloves must always be removed before leaving the room.
2. Wear a disposable gown for direct contact with the patient or the environment if the patient is incontinent, or has diarrhea or a draining wound.
   a. Gowns are removed and placed in a special container for next use.
   b. Cloth gowns may be substituted if there is no risk of splash
3. As per Standard Precautions, wear a mask and protective eyewear when performing procedures that generate aerosols (Standard Precautions)

14 questions pertaining to H1N1 Virus

51. The H1N1 swine flu virus is the same as human H1N1 virus.
A. True
B. False

52. Human H1N1 Virus is the following:
a. A common seasonal flu virus.
b. Believed to be a hybrid of pig, bird, and human flu viruses.
c. Only found in pigs (swine).
d. Deadly, killing almost everyone who is infected.

53. H1N1 can be transmitted by each of the following, except:
a. Large-particle droplets.
b. Touching contaminated surfaces.
c. Diarrheal stool.
d. Eating pork or pork products.

54. A person with confirmed H1N1 flu virus is potentially infectious for how long after the onset of illness?
a. 10 days
b. 12 days
c. 14 days
d. 16 days

55. Typical symptoms of those infected with H1N1 flu include all of the following except:
a. Blurred vision.
b. Fever, chills, and headache.
c. Vomiting or diarrhea.
d. Cough and sore throat.

56. H1N1 virus differs from other flu virus in that it appears to damage alveoli of the lungs.

   a. False
   b. True

57. All of the following groups are at high risk for complications of H1N1 influenza except:
a. Residents of nursing homes or other long-term care facilities.
b. Persons who are morbidly obese.
c. Middle-aged men.
d. Pregnant women.

58. A probable case of H1N1 virus infection is defined as a person who:
a. Has no flu symptoms but has traveled to where there have been confirmed cases.
b. Has tested positive for influenza A but negative for human H1 and H3.
c. Is a previously healthy person less than 65 years who has been hospitalized for ILI.
d. Lives near or works with pigs.
59. Antiviral treatment with drugs such as zanamivir (Relenza) or oseltamivir (Tamiflu) is:

a. Most effective when treatment is started within 48 hours of illness onset.
b. Recommended only for people with asthma or COPD.
c. Likely to make symptoms more severe but speed recovery.
d. Not to be administered more than 48 hours after onset of symptoms.

60. The H1N1 flu is resistant to:

a. Peramivir
b. Famciclovir
c. Abatacept (Orencia)
d. Rimantadine (Flumadine)

61. The H1N1 flu vaccine:

a. Is only available as live attenuated vaccine.
b. Must be administered on the same day as the seasonal flu vaccine.
c. Can be substituted for the seasonal flu vaccine.
d. Is intended to be used side by side with the seasonal flu vaccine.

62. Infection control recommendations for influenza should apply to all patients with fever plus one or more of the following:

a. Nasal congestion, sore throat, and cough.
b. Gastrointestinal pain and tenderness.
c. Generalized fatigue and/or muscle and joint stiffness.
d. Skin rash and sensitivity to light.

63. Frequent hand washing is the only infection-control measure necessary to inhibit the spread of the H1N1 flu virus.

a. True
b. False

64. To prevent the spread of H1N1 influenza in a healthcare setting one should: Choose all that apply.

a. All patients with suspected H1N1 should be placed in an airborne infection isolation room.
b. Patients with H1N1 should not be allowed visitors.
c. Respiratory hygiene/ cough etiquette practice measures should be followed.
d. All patients must wear a surgical mask at all times.