

FALL PREVENTION QUIZ RN

NAME _____ **DATE** _____ **UNIT** _____

PLEASE ACCESS THE FALL PREVENTION AND MANAGEMENT POLICY ON LINE:

MCLAREN INTRANET – MCLAREN FLINT- POLICIES AND PROCEDURES –LEVEL 2 POLICIES -PROVISION OF CARE, TX, SVCS - PC-116FALL PREVENTION AND MANAGEMENT

ANSWERS TO THIS QUIZ ARE IN THE FALL PREVENTION POLICY.

- 1.) ALL EMERGENCY AND INPATIENTS WILL HAVE A FALL RISK ASSESSMENT WITH THE ADMISSION HISTORY, EVERY SHIFT AND WITH ANY CHANGES IN CONDITION AND/OR LEVEL OF CARE.**

TRUE OR FALSE

- 2.) YOUR PATIENT IS A HIGH FALL RISK WHAT ARE 3 THINGS THE RN SHOULD INITIATE?**

3.) YOUR PATIENT HAS FALLEN. WHAT SHOULD THE RN DO FIRST?

- A.) CALL THE DOCTOR**
- B.) COMPLETE AN INCIDENT REPORT**
- C.) ASSESS THE PATIENT FOR INJURIES.**
- D.) FILL OUT AN SBAR REPORT.**

4.) THE ACRONYM C.A.R.E STANDS FOR:

- A.) CALL LIGHTS, ATTITUDE, RISK, AND ENVIRONMENT**
- B.) CREATE, ASSESS, REDUCE, EVERYONE**

5.) IT IS IMPORTANT THAT ALL FALL RISK PATIENTS AND THEIR FAMILIES RECEIVE FALL RISK EDUCATION. THE RN SHOULD DOCUMENT THAT THE EDUCATION WAS COMPLETED.

TRUE OR FALSE

6.) THE INFORMATION GATHERED AFTER A FALL WILL HELP WITH THE HOSPITAL PERFORMANCE IMPROVEMENT TEAMS TO PREVENT FUTURE FALLS.

TRUE OR FALSE