

REGULATORY TRAINING FOR NURSES/NURSING STUDENTS: **ANSWER KEY**

Name: _____ Date: _____

Directions: Circle the best answer to the following questions.

Safety Preparedness

1. Which type of suspected behavior does Colorado law require healthcare providers to report?
 - a) Animal abuse
 - b) Domestic violence
 - c) Vandalism
 - d) Child and elder abuse

Rationale: Option D is correct because persons are required by law to report possible child abuse under Colorado Revised Statutes §19-3-304 includes doctors, school personnel, social workers, mental health workers, and clergy members. The State of Colorado also provides protection for adults considered at risk (Federal Law 1974 Child Abuse Prevention and Treatment Act), and healthcare providers are urged to report suspected abuse.

2. You are bathing a patient and notice some injuries on the patient's back leading you to suspect abuse. What should you do? **Select all that apply.**
 - a) Ask the patient what happened
 - b) Ask the patient if he/she feels safe at home
 - c) Notify the next of kin
 - d) Notify the charge nurse
 - e) Notify the chaplain

Rationale: Options A, B, and D are correct. Gather all pertinent information prior to informing the nurse in charge. Telling anyone else other than the charge nurse may be a breach in confidentiality and right of privacy.

3. EMTALA refers to a patient's right to medically necessary care. Which of the following would be an EMTALA violation?
 - a) A rural hospital transfers a patient with a traumatic brain injury to a facility that specializes in that form of care.
 - b) A surgery center transfers a patient to a hospital after a respiratory arrest.
 - c) A laboring mother arrives at the ED of a hospital that is not contracted with her insurance. She is transferred to an appropriate facility.
 - d) An indigent patient with hypothermia and behavioral health issues is medically stabilized and moved to an appropriate psychiatric facility.

Rationale: Option C is correct because Emergency Medical Treatment and Active Labor Law (EMTALA) prohibit denying health coverage to those in labor regardless of health insurance coverage.

4. What is the safest method of ensuring proper patient identification?
 - a) Checking the patient's ID band once at the beginning of the shift
 - b) Only checking the patient's ID band prior to a procedure
 - c) Asking the patient's his/her name prior to a procedure
 - d) Checking the ID band prior to each procedure

Rationale: Option D is correct. Standards of Nursing Practice indicate safe practice is to check ID badge prior to any medication or intervention – one of the six routes. You should also ask the patient his/her name and check the PHI, not just check the patient's ID band at the beginning of the shift or only prior to medication administration.

5. What does the acronym P.A.S.S. mean in relation to fire safety?
- Pull the station fire alarm, alert the staff, stay calm, seek out the unit fire extinguisher
 - Pull the fire extinguisher pin, aim the nozzle at the base of the fire, squeeze the handle, sweep the fire from side to side
 - Pack sheets around the unit exit doors, activate the pull station fire alarm, select the appropriate fire extinguisher, standby for directions from administration
 - Page the code for a fire, alert the patient and the visitors, stay below the smoke, start and orderly evacuation

Rationale: Option B is correct. The Occupational Safety and Health Association (OSHA) identifies the P.A.S.S. technique for discharging a fire's extinguisher to be **P**ull, **A**im, **S**queeze, and **S**weep.

6. What is important to know about the concept of grounding for safety in the workplace?
- This is not a safe mechanism to ensure electrical safety
 - If there is a leak in the electrical system, it will be harmless when discharged
 - If a person touches a live wire that is grounded, they will be harmed
 - This is a concept associated with making lightning strikes harmless

Rationale: Option B is correct. Grounding is a method to direct an electrical current from air to ground without causing harm.

7. What does the acronym R.A.C.E. indicate in terms of actions to be taken when a fire is identified?
- Raise the patient, activate the alarm, contain the fire, evacuate the patients
 - Rescue the patient, activate the alarm, contain the fire, extinguish/evacuate the patients
 - Release the pin on the fire extinguisher, aim the fire extinguisher, contain the fire, extinguish the fire
 - Rescue the patient, aim the fire extinguisher, call for help, extinguish/evacuate the patients

Rationale: Option B is correct according to the OSHA Safety Directives. All other options do not signify what the acronym signifies.

8. If a patient loses his or her armband, what should you do?
- Just ask the patient his/her name
 - Use stickers from the chart
 - Apply a new arm band based on the facility's policies and procedure
 - Let the next shift handle it

Rationale: Option C is correct. The ID band should be replaced ASAP and patient's verbal response may be incorrect. Follow policy of facility to replace the band.

9. What are some of the common reasons why patients may fall while hospitalized? **Select all that apply.**
- Private room with no supervision

- b. Weakness due to illness
- c. Clutter in the room
- d. Medications
- e. Use of assistive devices

Rationale: Options B, C, and D are correct. Clutter, muscle weakness, gait/balance disorders, visual disturbances, cognitive impairment/mental status alterations, incontinence, polypharmacy are all contributors to fall risk.

10. A thunderstorm comes up suddenly and knocks out the main electrical power in the hospital. Your CNA was in the middle of changing a patients' bed. The patient has a respiratory disorder that requires the head of his bed to be elevated. The CNA reports she cannot get the head of the bed to elevate. What should you instruct her to do?
- a) Instruct the CNA to take the unit flashlight and re-plug the bed into a red wall plug.
 - b) Tell the CNA not to worry; the generator will come on within two minutes where the bed can be elevated.
 - c) Counsel the CNA about using poor judgment when she lowered the head of the patient's bed.
 - d) Call the nursing house supervisor to report the patient care problem.

Rationale: Option A is correct. The red plugs in a patient's room are all connected to an emergency power supply as back-up if the power is loss.

11. Handoff communication between healthcare providers must include information about patient's requirements for care. What is an appropriate circumstance where handoff communication should take place?
- a) When helping the patient ambulate to the bathroom
 - b) when a transporter takes a patient to a test or procedure
 - c) when transferring a patient to the other bed in a double room
 - d) when preparing a patient to receive a medication

Rationale: Option B is correct. Communication needs to be proactive with any staff or persons who may be involved in the patient's care or that they may come in contact with.

12. Which situation would be considered a restraint?
- a) The use of bed alarms
 - b) Having all available bedrails up halfway
 - c) Soft mitts to prevent picking at IVs
 - d) Gait belt used when ambulating

Rationale: Option C is correct. Soft mitts are a type of restraint that would require an order from the health care provider.

13. Which of the following resources provides a healthcare worker with specific information on a chemical product?
- a) Occupational Safety and Health Administration (OSHA) alerts
 - b) Material Safety Data Sheets (MSDS)
 - c) Hazardous Materials Information System (HMIS) labels

- d) National Fire Protection Association (NFPA) diamonds.

Rationale: Option B is correct according to OSHA who produce these data sheets.

14. The nurse would check the patient's ID band prior to taking which action?
- a) Allowing patient to take own medications from home
 - b) Allowing visitors
 - c) Transfusing blood
 - d) Allowing patient to go smoke

Rationale: Option C is correct. ID needs to be checked before any medication or intervention as a safety practice.

15. Which of the following would be considered a medication error?
- a) Patient develops a rash at an injection site
 - b) Patient refuses to take medication
 - c) Patient receives SQ insulin checked by the nurse and patient
 - d) Oral medications are given late due to vomiting

Rationale: Option C is correct. In the majority of health care facilities, it is policy to have insulin injections checked by two nurses, the injection would not be checked by the patient; doing so would be considered a medication error.

16. A patient has signed consent for treatment; he/she is legally able to receive which types of treatment?
- a) Surgery
 - b) Invasive diagnostic procedure
 - c) Mediation ordered by the physician
 - d) None, further consents will need to be signed for ANY type of treatment

Rationale: Option C is correct. The consent for treatment signed at the initial time of hospitalization allows the nurse to give medication as ordered by a health care provider. Additional consents must be signed for specific treatments – surgery and invasive tests.

17. What types of procedures must patients or their legal guardians sign consents for in order to have a treatment/procedure administered after admission to the hospital?
- a) Special procedures performed by physicians requiring sedation, narcotics or anesthesia
 - b) Treatments administered by nursing staff that patients/legal guardians consent to
 - c) Non-invasive diagnostic procedures ordered by health care providers
 - d) Leaving the unit for social interaction with family and friends

Rationale: Option A is correct. Additional consents must be signed for specific treatments – surgery and invasive tests.

OSHA

18. Bloodborne pathogens that can put healthcare workers at risk. What is an example of a bloodborne illness that would be considered a low risk for healthcare workers to acquire from a patient?

- a) HIV/AIDs
- b) West Nile Virus
- c) Hepatitis C
- d) Hepatitis B

Rationale: Option B is correct. West Nile virus (WNV) is usually contracted from infected mosquitoes and not transmitted from person to person making (WNV) not a high risk disease to be acquired within a healthcare facility. All other options are pathogens that can be transmitted from person to person and can therefore place the caregiver at risk. Once the health care worker receives the Hepatitis B vaccine series, Hepatitis C and HIV/AIDS are the only two of the four diseases that remain a risk.

19. A health care worker is caring for a patient with the intestinal flu. One of the gloves tears and contaminates the health care worker's hand with vomitus from the patient. There are no visible areas of non-intact skin on the health care worker. What is appropriate action for the health care worker to take pertaining to this situation?
- a) Complete an incident report
 - b) No action needs to be taken, this is not considered an exposure where the patient is at risk
 - c) Remove your gloves (ensuring patient safety), wash your hands with soap and water and put on a new pair of gloves
 - d) Report the incident to the supervisor immediately

Rationale: Option C is correct. Exposure is strictly used for those situations where transmission could occur and follow-up is needed. Exposure to blood or body fluid (except sweat) on intact skin is not a reportable incident (Option D). An incident report is not needed as the health care worker had intact skin (Option A). This is not considered an exposure because the person had intact skin, no further action is needed (Options B).

20. If you get a bomb threat phone call, what should you do first?
- a) hang up on the caller quickly
 - b) write down all information you can about the caller's identity and location
 - c) notify the police immediately
 - d) overhead page with a bomb threat warning as soon as you hang up

Rationale: Option B is correct because getting as much information as possible allows more likelihood of knowing where, who, when, etc as to the bomb threat. Write down the information so not to forget.

21. Which situation would warrant the need to wear a mask with an eye shield or a full face shield?
- a) You are changing a dressing on surgical wound that contains dry, crusty drainage on a patient 1 week post-op
 - b) You are cleaning up the bedside table after a chest tube has been inserted
 - c) You are preparing the body for family members to view after the patient has expired
 - d) You are performing tracheal suction on a patient with a new tracheostomy tube

Rationale: Option D is correct. Wear a mask with eye shield or full-face shield when there is the possibility of body fluids being splashed or splattered on the health care worker. The eyes, nose and mouth should be protected from aerosolized blood and body fluid while suctioning.

22. Which of the following should be placed in a biohazard bag?

- a) contaminated needles
- b) a towel containing clear drainage
- c) dressings with serous wound drainage fully absorbed
- d) chux pads with a small amount of urine

Rationale: Option C is correct. OSHA defines “regulated waste” as “liquid or semi-liquid blood or other potentially infectious materials (OPIM); contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; ... pathological and microbiological wastes containing blood or other potentially infectious materials” are placed in biohazard bags.

23. Which behavior would best indicate to the nurse that a family member may become violent?
- a) providing the nurse with information from the internet about the patient’s illness
 - b) getting ice from the ice machine without asking permission
 - c) being withdrawn and refusing to speak to anyone
 - d) arguing with the physician about treatment administered to the patient

Rationale: Option D is correct. Anytime a person shows signs of aggression (arguing), and is under stress from the illness of a loved one, they could be most susceptible to commit an act of violence. Although providing information to the health care worker they learned about on the internet, may indicate that the family member may disagree with the care being given – it can also indicate a need to further teaching about their loved ones illness (Option A). By not asking permission to get ice, the family member may be indicating a need for control or may just be impatient with the staff, or may not want to bother the staff; it cannot be confirmed as an act of aggression (Option B). A person who is withdrawn may indicate a sense of helplessness and need to talk with the health care worker.

24. When transferring a patient out of bed who requires total assistance, what is an appropriate piece of equipment to use?
- a) a mechanical lift
 - b) transfer belt
 - c) another person
 - d) sliding board

Rationale: Option A is correct. The potential for patient injury (such as falls and skin tears) as a consequence of a manual handling mishap is reduced by using an assistive device such as a mechanical lift, which provide a more secure process for lifting, transferring or repositioning tasks. A transfer belt is an appropriate tool to use if the patient can help but would not be appropriate for a patient who requires total assistance (Option B). Another person may be needed to help with the mechanical lift transfer, but will not be enough for a safe transfer of a person who needs total assistance (Option C). A sliding board is needed to move a person from the bed onto a gurney for transport (Option D).

25. Which of the following is considered a route for chemical exposures? **Select all that apply.**
- a) Inhalation
 - b) Direct contact
 - c) Indirect contact
 - d) Ingestion

- e) Wearing gloves

Rationale: Options A, B, and D are correct. There are four major routes of chemical exposure (ways a chemical may enter the body) – inhalation, eye/skin contact, ingestion and injection. Indirect contact would not be considered a chemical exposure (Option B) and wearing gloves would prevent exposure to a chemical and should be worn (Option E).

26. The nurse is caring for a patient with a positive acid-fast bacillus smear. What action would the nurse take?
- a) assure the patient is admitted to a semi- private room
 - b) assure the patient is admitted to an intensive care unit
 - c) wear a surgical mask
 - d) wear an N95 respirator mask that has been “fit tested”

Rationale: Option D is correct because a regular/surgical mask is ineffective against TB (Option C). An N95 respirator mask must be individually fitted tested every year and the wearers taught to fit check the mask prior to every use. The patient would need to be placed in a negative airflow pressure isolation room (Option A, B).

27. Which of the following is considered a mechanism to ensure safe workplace practice?
- a) Transport lab specimens in leak proof containers labeled as biological hazards
 - b) Make sure the liquid that you drink at the nurse’s station is only water
 - c) Type of insurance
 - d) Patient’s preferred method of learning

Rationale: Option A is correct. According to the OSHA Safety Directives, work practice controls are the behaviors we engage in to prevent transmission of a disease. In this case, transporting th specimen in a leak proof container helps to prevent spills causing contamination/accidental exposure.

28. If a Tornado Warning is announced overhead, you should anticipate to take which action?
- a) Transfer patients to the basement
 - b) Move patients away from windows
 - c) Continue care as usual
 - d) Go home immediately

Rationale: Option B is correct according to the OSHA website during a Tornado Warning the most safe action is to stay away from doors, windows, and outside walls, so be aware of the need to move patients away from windows in the health care facility.

29. If you encounter someone that seems suspicious due to questions asked about the physical layout of the unit, location of newborns or wandering aimlessly on the unit, what is your first action?
- a) Notify security
 - b) Notify the charge nurse
 - c) Ask the visitor if you can help him/her
 - d) Ask the visitor if you can help him/her and notify security

Rationale: Option B is correct. In this specific situation when there is uncertainty (suspicious) about a person's behavior with regards to a child, inform those in authority so steps can be taken to ensure security of facility/staff/patients.

30. Healthcare workers can decrease their risk for developing latex sensitivity by taking what action?
- a) Wearing sterile latex gloves when administering patient care
 - b) Washing hands only with the waterless hand soaps
 - c) Wearing powder-free, vinyl, or nitrile gloves when administering patient care
 - d) Applying an oil-based hand lotion to hands immediately after removing latex gloves.

Rationale: Option C is correct. When at risk for developing latex sensitivity, consider the use of vinyl, nitrile or polymer gloves when working with infectious materials. All other options would not decrease the risk for latex sensitivity.

31. You are assisting the Radiology Technician obtain a portable chest x-ray on a patient. Which of the following are safety rules regarding radiation safety precautions? **Select all that apply.**
- a) Limit your time of exposure
 - b) Increase your distance from the radiation source
 - c) Wear protective leaded aprons
 - d) Limit contact with the patient
 - e) Wear safety goggles

Rationale: Options A, B and C are correct. Whatever the form of radiation, the three things that affect your exposure to it are **time, distance, and shielding.**

32. What is the only acceptable manner of hand hygiene when caring for a patient with *C. Difficile*?
- a) Using gloves while caring for the patient
 - b) Cleaning hands with alcohol based foam or gel before exiting the room
 - c) Washing hands with soap and water after exiting the room
 - d) Using gloves while caring for the patient and washing hands with soap and water before exiting the room

Rationale: Option D is correct. Wearing gloves and washing hands with soap/water are necessary measures to aid in preventing spread of *C. Difficile*. Waterless hand sanitizer will not kill the spores that *C. diff* can generate. The action of using soap, water, 15 seconds of good friction and rinsing will mechanically remove the *C. diff* spores.

33. What is the most important thing to do prior to placing a patient under contact precautions?
- a) admitting the patient to a negative air flow room
 - b) communicating "contact precautions" to all personnel
 - c) wearing a surgical mask
 - d) wearing eye protection

Rationale: Option B is correct. Contact precautions do not require a negative airflow room. Initial communication ensures that everyone knows to follow isolation precautions from the onset. Communication is most achieved with the use of signs outside the room and the placing of PPE just outside the room.

34. What is MRSA?

- a) A bacterial infection resistant to the antibiotic methicillin
- b) A microorganism that can infect surgical wounds
- c) An airborne pathogen
- d) A seasonal organism that plagues patients with compromised immunity

Rationale: Option A is correct. MRSA is an acronym for Methicillin Resistant Staphylococcus Aureus. MRSA is a bacteria that does not respond to treatment with the antibiotic methicillin.

35. A biohazard bag is used for waste contaminated with blood or body fluid. What color is the bag?
- a) Red
 - b) Green
 - c) Clear
 - d) Black

Rationale: Option A is correct according to OSHA that all biohazard bags are to be red.

36. What is the first action for the nurse to take after having been exposed to blood or other body fluids?
- a) Complete an incidence report
 - b) Contact your personal physician
 - c) Report to the emergency room
 - d) Wash the area thoroughly with soap and water

Rationale: Option D is correct. The first action a health care worker needs to take after having been exposed to a blood or other body fluids is to wash the area thoroughly, check the facility's policies to proceed further.

37. In a clinical area, when should you wash your hands?
- a) Before removing gloves
 - b) Before patient contact
 - c) After taking report
 - d) After eating

Rationale: Option B is correct. You should wash your hands before and after any/all patient contact to prevent the transmission of infective material to/from the patient.

HIPAA

38. What is one way a patient can request privacy restrictions of their PHI?
- a) Make a request to the organization in writing
 - b) Ask the physician to write a note for the chart
 - c) Ask a student nurse to post a note on their chart
 - d) The privacy restrictions on the PHI does not allow for requests.

Rationale: Option A is correct because according to HIPPA, the patient may make a request to the health care facility in writing about restrictions of access to their Personal Health Information. The HIPPA regulations are clear that no one else can be utilize to request privacy restrictions.

39. HIPAA regulations cover not just a patient's health-related information, but what other identifying information?

- a) Living will
- b) Names of pets
- c) Social security number
- d) Health care provider's name

Rationale: Option C is correct. HIPPA states "Individually identifiable health information includes many common identifiers (e.g. name, address, birthdate, Social Security number)". All other options are not correctly identified by HIPPA.

40. What is the correct method of disposing of copies of patient information?
- a) The dumpster in the back of the hospital
 - b) A shredder located on the unit
 - c) A locked shredder box in a designated area of the facility
 - d) In the trash can on the unit

Rationale: Option C is correct. Per HIPPA in regards to information privacy, "safeguards might include shredding documents containing protected health information before discarding them."

41. Disclosure of information can occur for a variety of reasons. What is a condition in which information disclosure can occur without the patient's consent? **Select all that apply.**
- a) Disaster relief
 - b) Required by law
 - c) Acquiring a non-communicable disease
 - d) When a family member requests it
 - e) In the event of a coroner's inquiry

Rationale: Options A, B, and E are correct. According to HIPPA, "Disclosure of information may be required by law or when information is needed to safeguard the well-being of others."

42. Which person would it be appropriate to release information about the patient to?
- a) the patient's (non-attending) physician's brother
 - b) personnel from the hospital the patient transferred from, who is calling to check on the patient
 - c) the respiratory therapy personnel doing an ordered procedure
 - d) a retired physician who is a friend of the family

Rationale: Option C is correct. HIPPA Act of 1996 public Law No. 104-191 "your information can be used and shared: For your treatment and care coordination." No other option is covered by HIPPA.

43. What does the patient have the right to do?
- a) Access and inspect their PHI
 - b) Take the PHI from the health care provider
 - c) Only request to make a copy of their PHI with current information
 - d) Request that they have access to their PHI after 10 days from request

Rationale: Option A is correct. A patient according to HIPPA has the right to access and inspect their Personal Health Information. They would not "take" the PHI from the health care provider (Option B), they can make a

request to make a copy of any information within the PHI, not just current information (Option C), and once they request access they are to receive a copy within 10 days after the request was made.

44. Which of the following are some common features designed to protect confidentiality of health information contained in patient medical records? **Select all that apply.**

- a) locks on medical records rooms
- b) passwords to access computerized records
- c) rules that prohibit employees from looking at records unless they have a need to know
- d) isolate workers from each other when on shift
- e) allow only supervisors to have access to the health record

Rationale: Options A, B and C are correct. Safeguards might include shredding documents containing protected health information before discarding them, securing medical records with lock and key or passcode, and limiting access to keys or pass codes (HIPAA).

45. HIPAA security and privacy regulations regarding attending HIPAA training and being aware of HIPAA requirements apply to which group of people?

- a) family members
- b) construction workers doing remodeling on the outside of the building
- c) all healthcare providers (including students and volunteers) working in the facility
- d) only staff having direct patient contact

Rationale: Option C is correct. Any person employed within a health care facility are required to attend HIPAA training and sign papers to verify that they are aware of the requirements of maintaining patient privacy – including billing, medical records, housekeeping, dietary, all health care personnel, etc.

46. Which of the following is an appropriate person with whom to share patient information?

- a) A former physician of the patient who is concerned about the patient
- b) A colleague who needs information about the patient to provide proper care
- c) A friend of the patient who has come to visit the patient
- d) A pharmaceutical salesman who is offering a fee for a list of patients to whom he can send a free sample of his product

Rationale: Option B is correct. HIPAA Act of 1996 Public Law No. 104-191, “Patient information can be used and shared for treatment and care coordination.”

47. A nurse has been following the blog of one of her pediatric patient’s mother who has been describing her child’s experience with a terminal disease. The nurse reached out to the mother in a blog response, describing a treatment to reduce a side effect of a medication newly prescribed medication. The next day one of the nurse’s neighbors commented that she had read the response and wondered what whether the nurse thought the new medication would cure the child. It occurred to the nurse that HIPAA laws may have been violated. What should she do?

- a) Nothing. She was only supporting and showing empathy towards Mom’s situation, and she knew the blog is only accessible by the people Mom selected.
- b) Attempt to delete the post as soon as possible.
- c) Report her actions immediately to her employer and the board of nursing.

- d) Get Mom's verbal permission to share those aspects of her health information.

Rationale: Option C is correct. The actions should be reported in order to determine whether a possible breach occurred which may require possible disciplinary action.

48. Posting a picture on social media that includes a picture of a patient or any other aspect of clinical, can be
- a) A breach of patient confidentiality
 - b) A violation of federal privacy laws
 - c) A reason for expulsion from nursing school
 - d) All the above

Rationale: Option D is correct. Posting any picture on any social media site from a clinical site may include information that may identify a patient or visitor in a clinical setting, violating their confidentiality and HIPAA. Violating these laws is a reason to be terminated from the nursing program.

49. At a long-term care facility, a physician often text messages orders to the nursing staff on their personal cell phones, as it is easier and quicker to transmit orders than calling them in on the phone. One night, a nurse is at a party with several community members. She receives a text message and her husband picks it up the phone. He and others see a different text that includes a drug screen order for a patient that is a family member of someone at the party. The family member was angered by the personal information about his family member that was just released to the public.

This is an obvious example of inappropriate use of texting in a healthcare setting. Which of the following is also a breach of a patient's confidentiality and privacy rights through text messaging?

- a) A student texts the instructor an hour before clinical: "I will be 5 minutes late due to my car not starting this morning."
- b) A student texts the instructor: "I am ready for you to come help me place a foley. I am in Mr. G's room, Medical 2250."
- c) A student texts the instructor: "I have some concerns about my progress in the course and could use some time to talk. Can we set up a time to meet?"
- d) None of these are breaches of patient confidentiality and privacy.

Rationale: Option B is correct. In the case study, the nurses and physician are in violation of laws protecting patient privacy and confidentiality. Cell phones may be permitted in some situations for communicating within a facility, but the phones would need to be provided and secured by the facility. Personal phones would never be an appropriate way to communicate patient information. It would be appropriate for a student to communicate information about their situation if it was deemed appropriate by the instructor; however answer B includes communication of patient information which is a violation of the patient's privacy. It is inappropriate to communicate any information about a clinical location or patient via text messaging.

50. Which of the following would be appropriate to take a picture of with a personal device (i.e. cell phone) during a clinical rotation?
- a) A patient you have gotten to know personally and would like to remember as a part of your nursing school experience.
 - b) A wound you dressed for the first time. The picture does not include the patient's face and is just centered over the wound you dressed.

- c) Your clinical group on the last day of the rotation in front of the unit's sign.
- d) None of the above.

Rationale: Option D is correct. It is inappropriate to take a picture of any aspect of your clinical rotation on your personal cell phone for personal use.