Primary Care 7th edition Buttaro Test Bank

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Test Bank - Chapter 001

Q: A small, rural hospital is part of an Accountable Care Organization (ACO) and is designated as a Level 1 ACO. What is part of this designation?

A. Bonuses based on achievement of benchmarks (Correct)
B. Care coordination for chronic diseases
C. Standards for minimum cash reserves
D. Strict requirements for financial reporting

Q: What was an important finding of the Advisory Board Company survey about the primary care preferences of patients?

A. Associations with area hospitals
B. Costs of ambulatory care
C. Ease of access to care (Correct)
D. The ratio of providers to patients

Q: Which assessments of care providers are performed as part of the value-based purchasing (VBP) initiative? (*Select all that apply*.)
(Select all that apply.)

A. Appraising costs per case of care for Medicare patients (Correct)
B. Assessing patients' satisfaction with hospital care (Correct)
C. Evaluating available evidence to guide clinical care guidelines
D. Monitoring clinical care outcomes (Correct)
E. Requiring advanced IT standards and minimum cash reserves

Review Questions - Part 01

Q: Interprofessional collaboration is important for successful, cost-effective care, but the American healthcare system faces challenges such as

A. an aging population with multiple chronic medical conditions that may require multiple medications. (Correct)

B. lack of primary care providers.

C. excessive financial and social resources.

D. healthcare providers who have unlimited time and resources that must be used.

Q: Value-based purchasing is a Center for Medicare and Medicaid Services (CMS) initiative that affects all practicing providers who admit Medicare patients to a hospital setting. The goal of this initiative is to improve patient care quality by linking payment by CMS for impatient services to successful patient outcomes. Unplanned hospital readmission within 30 days is one metric that this program evaluates. This has encouraged hospitals to

A. discharge patients early in the morning to make beds available to waiting patients.

B. keep patients admitted for longer to better manage their chronic conditions.

C. improve communication and care coordination to help involve patients and their caregivers in the discharge plans. (Correct)

D. hire more primary care providers to better manage patients' chronic medical conditions in an outpatient setting.

Q: The National Academy of Science, Engineering, and Medicine has created a definition of primary care and has also developed six aims of patient-centered primary care. Which of the following is one of those aims?

A. Patient centered: Providing care that is respectful of and responsive to individual patient preferences, needs, and values, and ensuring that patient values guide all clinic decisions. (Correct)

B. Inexpensive: Medical care should not come at a high price.

C. Replaced by specialists: Medical care has become so specialized that there is no longer a need for primary care providers.

D. Family and caregiver centered: Providing care to a patient means involving all those that will be helping and working with that patient to ensure their needs are the priority before the patient's needs.

Q: Evidence-based practice was implemented by Archibald Cochrane in response to observations that

A. clinical outcomes are most effective when developed using traditions and guidance handed down from previous generations of clinicians.

B. treatment decisions were being made without evidence to demonstrate the effectiveness of those interventions. (Correct)

C. research in medicine was unnecessary as each patient requires a unique plan of care.

D. only physicians were concerned with evidence-based practice. Evidence-based practice was not necessary for nurses.

Q: A nurse on a med-surg unit believes that bedside handoff report could improve patient care and outcomes. This nurse recognizes the need and discusses it with the unit manager. The nurse manager researches evidence-based practice using this technique. The nurse manager creates and plans staff education around bedside report. The unit adopts a bedside handoff report

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procedure, and it is monitored for effectiveness. This process was created using Lewin's change theory.

A. Understanding how, why, and what rate new ideas spread through a specific population.
B. Proposing a new idea, researching a new idea, and implementing the new idea in practice.
C. Unfreezing, movement, and refreezing. (Correct)
D. Lewin's change theory consists of five steps: knowledge, persuasion, decision, implementation, and confirmation.

Q: A primary care provider is utilizing the Chronic Care Model (CCM) when treating an 80-year-old patient with multiple chronic medical conditions. This provider ensures that their patient understands all their diagnoses as well as their medication treatment plan, has appropriate referrals to specialists, and is up-to-date with appropriate vaccinations. By doing all these things, the provider is focusing on _____ needs of the patient's health condition rather than fragmented, episodic visits.

A. lateral
B. long-term
C. longitudinal (Correct)
D. most urgent

Q: You are caring for a 68-year-old patient with a history of hypertension, DM2, and COPD. The patient asks you when they will be able to stop taking their medication because they will be "cured." You explain to the patient that their conditions are chronic diseases that place limits on their daily activities and require regular medical care. Your patient asks you if there is an amount of time associated with a chronic disease.

A. More than 6 years
B. More than 6 months
C. No definitive amount of time
D. More than 1 year (Correct)

Q: You are asked to explain how the Chronic Care Model (CCM), which was developed to organize the care of the chronically ill with the focus of care being the hospitalized patient, differs from the new Expanded Chronic Care Model (ECCM).

A. ECCM addresses the focus of illness care moving from hospital-based to community-based care. (Correct)
B. ECCM includes more chronic medical conditions.
C. ECCM is no different than CCM.
D. ECCM includes more medical specialties than CCM.

Q: The Integrated Care Management Program (iCMP) focuses on the identification and aggressive management of the most complex, high-risk patients to control costs and improve the quality of care and life for the patient.

A. This program gives patients access to a physician 7 days a week for any medical need.
B. iCMP connects patients with a social worker for non-medical needs.
C. In this program, patients are paired with a nurse care manager to work closely with them and their families. (Correct)
D. This program provides all patients with access to a physical therapist, regardless of their diagnosis.

Q: Telehealth or telemedicine allows for increased access to care for patients with acute and chronic diseases. This is a form of electronic communication between a medical provider and a patient in order to provide medical services or monitoring without the patient having to travel to a healthcare facility. Telehealth services are divided into two categories: synchronous and _____.

A. Synchronous is the only option for telehealth services.
B. Medical app
C. Asynchronous (Correct)
D. Zoom, Microsoft Teams, or other video platforms

Q: Healthy People 2030 describes health equity as "the attainment of the _____ for all people."

A. basic healthcare needs
B. highest level of health (Correct)
C. most urgent healthcare needs
D. access to health care

Q: Primary care providers have a role in assessing a patient's personal health literacy to create actionable steps for improving a person's health and the health of their communities. A new mother brings her 6-month-old child in for a well visit. The pediatrician explains what childhood vaccinations can be administered during that visit and the risks and benefits of each vaccination. The mother gives permission for her child to receive those vaccinations. What part of personal health literacy is the mother performing?

A. Applying the information learned (Correct)
B. Memorizing the information learned
C. Disregarding the information learned
D. Choosing what information applies to them

Q: In order to meet the needs of patients and/or their caregivers with less-than-optimal health literacy, providers should develop the awareness, knowledge, and possible interventions needed to address inadequate health literacy. Research studies have found that instead of just printed information, alternate formats of information delivery that can be helpful to patients and/or caregivers with low health literacy may include

A. music
B. larger printed handouts
C. discussion with the medical provider
D. videos and/or pictures/tables/charts (Correct)

Q: A first step that a clinician should take when assessing risk for the patient as well as family members is to take a thorough family history. Why is this process often referred to as the "first genetic test"?

A. Family members have probably had some level of genetic testing completed.
B. When done correctly, it can highlight common diseases and disease clusters within a family. (Correct)
C. It is part of the new patient paperwork.
D. A patient's family history is never referred to as the "first genetic test."

Q: The first few seconds that the practitioner spends with the patient are considered the "cornerstone" of the patient-practitioner relationship and should communicate professionalism and

genuine regard for the patient.

A. As the provider, you rush through the patient visit because you are already behind schedule.
B. As the provider, you understand that the number of tests ordered correlates with high patient satisfaction scores.
C. As the provider, you understand that physical appearance is important, and you do not wear your white coat so you do not intimidate your patients.
D. As a provider, you enter a patient's room and greet them with a smile, make eye contact, offer your hand to shake, and speak confidently. You do understand that greetings in some cultures may vary. (Correct)

Q: Informed consent is based on the ethical principle of autonomy and is required for any invasive patient procedure done in an office or healthcare facility. A well-written, signed informed consent serves as evidence that the patient received the appropriate information and is crucial to defending a malpractice claim. Informed consent is just as important in managing the patient's expectations. When can malpractice claims arise with regard to a procedure?

A. When the patient's expectations do not align with the treatment outcomes. (Correct)
B. When the procedure is a success.
C. When the procedure results in patient out-of-pocket expenses.
D. Malpractice claims cannot result from procedures.

Q: Nurse practitioners are nationally certified healthcare providers that are licensed by the state in which they practice. Whose responsibility is it to know and understand the scope of practice in that state?

A. The national certifying body
B. The collaborative physician
C. The individual nurse practitioner practicing in that state (Correct)
D. The office manager

Q: You are seeing a patient post-ER discharge for acute back pain. The ER physician prescribed a short course of opioid pain medication, and the patient is requesting more from you. Before writing the prescription, you administered a screening that the CDC recommends to help reduce the risk of accidental death.

A. Suicide screening
B. Depression screening
C. Exercise screening
D. Alcohol screening (Correct)

Q: A patient asks you about stopping their prescribed anxiety medication and only using endocannabinoids to manage their anxiety. The patient informs you that they have a friend who uses it for their anxiety and claims it works better than prescribed medication. How do you address this issue?

A. Endocannabinoids can be considered as adjunctive therapy, but you do not recommend them as replacements for medications with proven benefits. (Correct)
B. You explain that the only treatment option for a chronic medical condition, such as anxiety, is strictly pharmaceutical medication.
C. You inform the patient that you cannot discuss endocannabinoids because they are considered an illegal substance.
D. You agree to the patient's request.

Q: High-performing companies are found to use a positive organizational culture to enable efficiency and to enable employees to achieve both personal and organizational goals. Healthy organizational cultures often result in which of the following?

A. Decreased productivity
B. Greater collaboration among employees and departments (Correct)
C. Greater independence among employees
D. High employee promotion rates