

Pressure Ulcers eCourse: Module 2 – Quiz II

1. Yellow or white tissue that adheres to the ulcer bed in strings or thick clumps or is mucinous is:
 - a. Eschar
 - b. Slough
 - c. Granulation tissue
 - d. Epithelial tissue

2. New pink or shiny tissue (skin) that grows in from the edges or as islands on the ulcer surface is:
 - a. Eschar
 - b. Slough
 - c. Granulation tissue
 - d. Epithelial tissue

3. Undermining and tunneling are common at what pressure ulcer stage?
 - a. Stage I
 - b. Stage II
 - c. Stage III
 - d. Stage IV

4. Exposed bone, tendon or muscle is a characteristic of what pressure ulcer stage?
 - a. Stage I
 - b. Stage II
 - c. Stage III
 - d. Stage IV

5. Shear is a mechanical force that occurs _____ to an area of tissue.
 - a. Parallel
 - b. Perpendicular
 - c. Oblique
 - d. Opposite

6. The greatest risk factor for pressure ulcer development is:
- a. Immobility
 - b. Advanced age
 - c. Incontinence
 - d. Malnutrition
7. Infection increases the pressure needed to cause tissue necrosis.
- True False
8. As tissue perfusion drops, the skin is less tolerant of sustained external pressure, increasing the risk of damage from ischemia.
- True False
9. A direct correlation exists between pressure ulcer stage and the degree of hyperalbuminemia.
- True False
10. Older adults have more lean body mass and more subcutaneous tissue to cushion bony areas.
- True False
11. A pressure ulcer is a skin lesion caused by unrelieved pressure resulting in damage to the underlying tissue.
- True False
12. Which of the following are at risk for developing pressure ulcers?
- a. Bedridden patients
 - b. Stroke victims
 - c. Patients with diabetes
 - d. Malnourished seniors
 - e. All of these

13. Pressure ulcers tend to develop when the skin is dry.
- True False
14. What occurs when the skin is rubbed against an external surface?
- a. Continuous pressure
 - b. Friction
 - c. Shear
 - d. Force
15. Which of the following causes much of the damage often observed with pressure ulcers?
- a. Continuous pressure
 - b. Friction
 - c. Shear
 - d. Force
16. Skin damage often reported as sheet burn is due to:
- a. Continuous pressure
 - b. Friction
 - c. Shear
 - d. Force
17. Areas of the body that are most susceptible to pressure ulcers are NOT well padded with flesh and fat.
- True False
18. Which of the following is NOT a complication of pressure-causing effects?
- a. Ischemia
 - b. Hypoxia
 - c. Necrosis
 - d. Shearing

19. Why does impaired mobility contribute to development of pressure ulcers?
- a. Patients not able to alter position to relieve pressure
 - b. Muscle and soft tissue atrophy may develop decreasing bulk over bony prominences
 - c. Patients are recovering from a traumatic injury
 - d. Patients are not able to sense pressure on their body
20. Intrinsic factors that cause pressure ulcers are those in the patient's immediate environment that place him or her at risk of developing pressure ulcers.
- True False
21. Which of the following medical equipment can cause pressure ulcers?
- a. Endotracheal tubes
 - b. Nasal cannula
 - c. Urinary catheters
 - d. All of these
22. Mental health is NOT a consideration in the development of pressure ulcers.
- True False
23. Which of the following factors have been shown to contribute to pressure ulcer development?
- a. Dehydration
 - b. Emotional stress
 - c. Cigarette smoking
 - d. All of these
24. The various stages of classification of pressure ulcers indicate that all pressure ulcers follow a standard progression and that healing of pressure ulcers follows a standard regression.
- True False
25. Patients with diabetes who are undergoing surgery have the same risk for pressure ulcer development as non-diabetic patients.
- True False

26. Patients and residents admitted to an intensive care unit are among the main group at high risk for development of pressure ulcers.

True False

27. In infants and children that were hospitalized, the 3 most common sites for pressure ulcers were:

- a. Occiput
- b. Sacrum
- c. Foot area
- d. Knees
- e. Elbows

28. Pressure ulcers in the pediatric population are often related to use of equipment or devices.

True False

29. In the United States, pressure ulcers are the leading iatrogenic (therapy or physician caused) cause of death.

True False

30. The predominant ages for patients with pressure ulcers are:

- a. 71 to 80
- b. 61 to 70
- c. 81 to 90
- d. 51 to 60

31. More than half the patients who develop pressure ulcers in the acute care setting will die over a 12-month period.

True False

32. The wound is located in skin folds; the edges are diffuse and irregular; the depth is partial thickness; there is no necrosis. This wound is likely:

- a. Incontinence associated dermatitis (IAD)
- b. Pressure ulcer (PU)

33. Tissue damage caused by the pressure of medical devices should NOT be classified as pressure ulcers.

True False

Answers to Module 2 – Quiz II

- Q1 b
Q2 d
Q3 d
Q4 d
Q5 a
Q6 a
Q7 False – Infection REDUCES the pressure needed to cause necrosis.
Q8 True
Q9 False – HYPOalbuminemia is related to pressure ulcer stages.
Q10 False – Older adults have LESS body mass and LESS fat to cushion bony areas.
Q11 True
Q12 e
Q13 False – Pressure ulcers worsen when the skin is macerated, overly moist and soaking in liquid from perspiration or incontinence.
Q14 b
Q15 c
Q16 b
Q17 True – Pressure ulcers often develop in such places as tailbone, shoulder blades, hips, heels, ankles and elbows.
Q18 d
Q19 a,b
Q20 False – These are extrinsic factors; intrinsic factors relate to underlying health conditions.
Q21 d – Pressure ulcers have occurred on patient’s lips (endotracheal tubes), ears (nasal cannula) and thighs (urinary catheters).
Q22 False – Depression often leads to neglect of personal hygiene, making skin more vulnerable to injury and infection. Mental health is a risk factor.
Q23 d
Q24 False – The system is designed to describe the degree of tissue damage observed at time of examination and facilitate communication.
Q25 False – Patients with diabetes undergoing surgery have three times higher risk because their baseline conditions of compromised circulation and sensation loss due to peripheral diabetic neuropathy.
Q26 True – These patients are often immobile for extended periods of time and have more serious illnesses.
Q27 a,b,c
Q28 True – Prevalence rates between 20% and 27% have been reported; most pressure ulcers develop within two days of admission.
Q29 False – Pressure ulcers are the second iatrogenic cause of death after adverse drug reactions.
Q30 a
Q31 True – These patients die because of their primary disease’s progress, but the pressure ulcer may be a contributing factor in some instance.
Q32 a
Q33 False – The current position of the NPUAP-EPUAP is that tissue damage due to pressure of medical devices SHOULD be classified as a pressure ulcer.