

Pressure Ulcers eCourse: Module 2 – Quiz I

1. Black, brown or tan tissue that adheres firmly to the wound bed or ulcer edges and may be either firmer or softer than surrounding tissue is:
 - a. Eschar
 - b. Slough
 - c. Granulation tissue
 - d. Epithelial tissue

2. Pink or beefy red tissue with a shiny, moist, grainy appearance is:
 - a. Eschar
 - b. Slough
 - c. Granulation tissue
 - d. Epithelial tissue

3. A Stage I pressure ulcer will differ from the adjacent skin area in terms of:
 - a. Skin temperature (warmer or cooler)
 - b. Tissue consistency (firm)
 - c. Sensation (pain)
 - d. Slough and eschar

4. An unstageable pressure ulcer cannot be staged until enough slough or eschar is removed to expose the base of the wound.

True False

5. A suspected deep tissue injury is easier to detect in individuals with dark skin tones.

True False

6. Shear occurs when the skeleton and tissues slide while the skin remains still.

True False

7. Compressed skin has a higher local resistance to bacterial infection.
- True False
8. High blood pressure can lead to tissue ischemia, particularly with patients with vascular disorders.
- True False
9. A strong correlation exists between poor nutrition and the development of pressure ulcers.
- True False
10. Infection may reduce the pressure needed to cause tissue necrosis.
- True False
11. Which of the following is NOT a term for a pressure ulcer?
- a. Bedsore
 - b. Pressure sore
 - c. Decubitus ulcer
 - d. Incontinence associated dermatitis
12. Which of the following can be complications of pressure ulcers?
- a. Osteomyelitis
 - b. Cellulitis
 - c. Infectious arthritis
 - d. Renal failure
 - e. All of these
13. Pressure ulcers take a long time to develop.
- True False

14. What is a common cause of underlying tissue not receiving an adequate blood supply?
- a. Continuous pressure
 - b. Friction
 - c. Shear
 - d. Force
15. What happens when the skin moves one way while the underlying bone moves in the opposite direction?
- a. Continuous pressure
 - b. Friction
 - c. Shear
 - d. Force
16. If a patient slides down in a bed, or on a chair, or raises the top half of the bed too much, there is a risk of:
- a. Continuous pressure
 - b. Friction
 - c. Shearing
 - d. Sheet burn
17. Which of the following is NOT a factor in excessive pressure on soft tissue?
- a. Intensity of the pressure
 - b. Duration of the pressure
 - c. Tissue tolerance
 - d. Age of the patient
18. Pressure-causing effects take place when the bones rub against the skin and underlying deeper tissue.
- True False

19. Which of the following may cause circulation loss?
- a. Crumbs in bed
 - b. Wrinkles in sheets or clothing
 - c. Slightly tilting chair
 - d. All of these
20. All individuals are fairly similar in their susceptibility to pressure ulcers.
- True False
21. High-moisture environment created by urinary incontinence is a major factor in the production of pressure ulcers.
- True False
22. Which of the following medications do NOT contribute to pressure ulcers?
- a. Tranquillizers
 - b. Sedatives
 - c. Opiates
 - d. Steroids
 - e. Antibiotics
23. Which vitamin deficiencies may contribute to pressure ulcer development?
- a. Vitamins A, C and E
 - b. Vitamins C, K and D
 - c. Vitamins A, B and D
 - d. Vitamins C, D and E
24. Low blood pressure may contribute to pressure ulcer development.
- True False

25. The incidence of pressure ulcers in surgical patients can be as high as:
- a. 5%
 - b. 15%
 - c. 25%
 - d. 35%
 - e. 45%
26. Patients with healthy skin risk little tissue damage during surgery.
- True False
27. The most common sites for pressure ulcers in intensive care unit patients are:
- a. Sacrum and heels
 - b. Elbows and hips
 - c. Ears and knees
 - d. Shoulder blades and wrists
28. The majority of pressure ulcers found in pediatric units are:
- a. Stage I and II
 - b. Stage II and III
 - c. Stage III and IV
 - d. Unstageable or SDTI
29. Infants and children are as susceptible to pressure ulcers in the same areas as adults.
- True False
30. Pressure ulcers are increasingly common in health care organizations around the world.
- True False

31. Pressure ulcer prevalence in long term care organizations is estimated to be:
- a. 11% to 30%
 - b. 5% to 15%
 - c. 20% to 40%
 - d. 30% to 50%
32. Certain types of pressure ulcers (such as heel ulcers) will often result in the loss of a limb.
- True False
33. The characteristics of this wound are: located on a bony prominence; it has a distinct edge; the color is red/bluish purple; and the depth of the wound is full. This is likely:
- a. Incontinence associated dermatitis (IAD)
 - b. Pressure ulcer (PU)

Answers to Module 2 – Quiz I

- Q1 a
- Q2 c
- Q3 a,b,c
- Q4 True
- Q5 False – SDTI is MORE difficult to detect in individuals with dark skin.
- Q6 True
- Q7 False – Compressed skin has a LOWER resistance to infection.
- Q8 False – LOW blood pressure can lead to tissue ischemia.
- Q9 True
- Q10 True
- Q11 d
- Q12 e
- Q13 False – Pressure ulcers can develop in as little as 3 to 4 hours in some settings, e.g. operating room.
- Q14 a
- Q15 c
- Q16 c
- Q17 d
- Q18 True – When this happens, the capillaries are compressed, and oxygen and nutrients cannot be supplied to the tissue.
- Q19 d
- Q20 False – Every patient’s limits of tissue tolerance to pressure vary, making him or her more or less susceptible to pressure ulcers.
- Q21 False – Studies show that a large amount of moisture usually decreases shear and friction. However, mild moisture alters the resiliency of the epidermis, and shear and friction are increased to mild or moderate moisture.
- Q22 e
- Q23 a
- Q24 True – Hypotension may shunt blood flow away from the skin to more vital organs, decreasing the skin tolerance for pressure by allowing capillaries to close at lower levels of interface pressure.
- Q25 e
- Q26 False – One study found that surgical procedures lasting longer than four hours triple the risk of tissue damage. Therefore, even the healthiest patient can be at risk for tissue damage.
- Q27 a
- Q28 a
- Q29 False – Infants and children get pressure ulcers in DIFFERENT areas than adults. The most common areas are ear, sacrum, occipital area and scapula.
- Q30 True – In the United States, at least 1.7 million people develop pressure ulcers each year.
- Q31 a
- Q32 True
- Q33 b