



Each issue of *Assisted Living Consult* presents learning opportunities for assisted living facility staff. We urge practitioners and facility leaders to have their staff read the articles and challenge their knowledge using this Q&A section as a training test. By copying this page for each of your key staff, you can challenge their knowledge on these critical issues by having them answer these questions. Please note that each article title appears in bold with specific related questions.

## MTMS and the Million Dollar Question

1. Nursing home residents have access to all of the following services and benefit enhancements under Medicare Part D except:
  - a. Special enrollment period (ability to change plans at any time)
  - b. Elimination of cost sharing for the dually eligible
  - c. Coverage of all excluded Medicare Part D drugs (over-the-counters, benzodiazepines, and others)
  - d. Special packaging of medications like bubble packages
2. A targeted beneficiary for Medication Therapy Management Services (MTMS) must have all of the following criteria except:
  - a. Be living in a LTC facility
  - b. Have multiple chronic illnesses
  - c. Take multiple medications
  - d. Likely to incur medication costs of \$4000 per year
3. MTMS can be provided by which of the following providers:
  - a. Pharmacist
  - b. Physicians
  - c. Nurses
  - d. All of the above

## Interdisciplinary Team

4. Medicare provides reimbursement for occupational therapy services when which of the following exist?
  - a. An acute condition or functional impairment
  - b. Physician's prescription
  - c. An approved plan of care
  - d. All of the above
5. OT interventions in ALF generally focus on which all of the following except:
  - a. Improving the functional capabilities especially in the area of activities of daily living
  - b. Improvement in speech
  - c. Basic maintenance of one's room
  - d. Managing money
6. Environmental assessment and modification activities represent an important role for occupational therapists.
  - a. True
  - b. False

## Venous Thromboembolism

7. Venous thromboembolism is a concern for ALF residents because this disease increases with age.
  - a. True
  - b. False
8. The classic symptoms of deep venous thrombosis (DVT) includes all the following except:
  - a. Painful swollen legs
  - b. A purple discoloration
  - c. Hot inflamed skin
9. The classic signs of a pulmonary embolism include all the following except:
  - a. Pain
  - b. High fever
  - c. Cough
  - d. Shortness of breath

## Medical Transfers of ALF Residents

10. A large percentage of ALF residents have some form of memory/cognitive impairment and suffer from depression.
  - a. True
  - b. False
11. All of the following influence transfer decisions except:
  - a. Resident's right to age in place
  - b. Availability and expertise of nursing and medical care on-site at the ALF
  - c. Type of insurance coverage the ALF resident has
  - d. Family expectations

## Expert Roundtable

12. ALFs do not generally assume responsibility for assisting residents with completion of advance directives.
  - a. True
  - b. False
13. The Schiavo case has focused increased attention on advance directives and end of life care.
  - a. True
  - b. False
14. Withholding food or fluids during end-of-life care causes significant suffering.
  - a. True
  - b. False
15. Resuscitation outcomes in seniors are usually successful.
  - a. True
  - b. False

## MDA Clinical Practice Guideline: Pain Management in ALFs

16. Pain is defined as:
  - a. An individual's unpleasant sensory or emotional experience.

- b. Burning, shooting, or aching sensations
- c. Discomfort that adversely affects quality of life
- d. None of the above

17. Which of the following is not considered a barrier to pain treatment?

- a. Cognitive and communication barriers
- b. Cultural and social barriers
- c. Staffing overages
- d. System barriers

18. Pain can cause or lead to other conditions including:

- a. Gait disturbances
- b. Cognitive impairment
- c. Multiple medication use
- d. All of the above

19. Nonpharmacologic treatments for pain include:

- a. Cognitive therapies
- b. Biofeedback and behavior therapy
- c. Topical analgesics, such as counterirritants and capsaicin cream
- d. All of the above

20. Which of the following drugs is considered appropriate for treating pain in the elderly?

- a. Indomethacin
- b. Tramadol
- c. Pentazocine
- d. All of the above

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Please see Answer Key below.

17. c	18. d	19. d	20. b
13. a	14. b	15. b	16. a
9. b	10. a	11. c	12. a
5. b	6. b	7. a	8. b
1. c	2. a	3. d	4. d

**Answer Key**

# Coming Attractions

## Clinical Issues that Can Positively Impact Facility Occupancy Rates

The premature departure of residents from ALFs as a result of delays in diagnosing and treating clinical issues is a seldom discussed but all too common missed opportunity. Problems such as falls are often the result of or exacerbated by clinical conditions such as anemia, osteoporosis, or even sleep deprivation. These conditions, consequently, often go unrecognized until a fall—and a resulting fracture—occur that necessitate a hospitalization, cause loss of functioning or independence, and/or exacerbate other problems. By focusing on these often silent conditions through comprehensive interdisciplinary clinical programs, facilities can improve not only the health of their residents but also their own financial bottom line.

*Assisted Living Consult* is committed to addressing these conditions, and we will be addressing them in the coming months:

- Parkinson’s Disease (from the American Medical Directors Association’s clinical practice guideline)
- Diabetes (from the American Medical Directors Association’s clinical practice guideline)
- Q&A with Osteoporosis Experts about the Importance of Early Diagnosis and Patient-Physician Communication
- Sleep Deprivation
- Interactions Between Physical Plant/Operations and Clinical Care for Alzheimer’s Disease Residents
- Target Exercise
- Discomfort Evaluation in ALFs

The main reason that most residents come to ALFs is because of their anticipated clinical needs. By promoting a program that addresses all of these needs effectively, not only can facilities retain their residents longer but they also can attract more residents to their community.

ALC encourages you to consider what causes the “side door” exits in your facilities and to tell us what types of articles, topics, or experts can help prevent them and help you maximize the quality of care for ALF residents. Write to Dr. Richard Stefanacci at [rstefanacci@assistedlivingconsult.com](mailto:rstefanacci@assistedlivingconsult.com).