

Test Bank for Kinn's the Administrative Medical Assistant 14th Niedzwiecki

TEST BANK SAMPLE PREVIEW

PUBLISHER

Evolve

COPYRIGHT

2020

ISBN

9780323613651

RESOURCE TYPE

Test Bank

MULTIPLE CHOICE

1. This therapeutic communication technique involves putting words to the person's emotional reaction, which acknowledges the person's feelings?
 - a. Clarification
 - b. Silence
 - c. Restatement
 - d. Reflection
 - e. Summarizing

ANS: D

Reflection—Putting words to the person's emotional reaction, which acknowledges the person's feelings. Also helps to check what the person is feeling instead of just assuming. Shows empathy and helps build rapport.

REF: p. 38 OBJ: 5 TOP: Communication: Therapeutic
MSC: CAAHEP: V.C.1, ABHES: 5.h

2. This therapeutic communication technique allows the listener to get additional information. The listener can ask, "Do you mean ..."
 - a. Clarification
 - b. Silence
 - c. Restatement
 - d. Reflection
 - e. Summarizing

ANS: A

Clarification—Allows the listener to get additional information.

REF: p. 38 OBJ: 5 TOP: Communication: Therapeutic
MSC: CAAHEP: V.C.1, ABHES: 5.h

3. This therapeutic communication technique involves rewording a statement to check the meaning and interpretation.
 - a. Neutral
 - b. Summarizing
 - c. Clarification
 - d. Paraphrasing
 - e. Reflection

ANS: D

Restatement or paraphrasing—Rewording or rephrasing a statement to check the meaning and interpretation. Also shows you are listening and understanding the speaker.

REF: p. 38 OBJ: 5 TOP: Communication: Therapeutic
MSC: CAAHEP: V.C.1, ABHES: 5.h

4. Which of the following are barriers to communication?
- a. Environmental distractions
 - b. Internal distractions
 - c. Hearing impaired
 - d. Illiterate
 - e. All are correct

ANS: E

Barriers to communication include: environmental distractions, internal distractions, visually impaired, hearing impaired, intellectual disability, illiterate, non-English speaking, and emotional distractions.

REF: p. 38 OBJ: 6 TOP: Communication: Barriers
MSC: CAAHEP: V.C.4, ABHES: 5.h

5. Which of the following is an internal distraction to communication?
- a. Unable to understand what is being said
 - b. Pain
 - c. Noise
 - d. Unable to read
 - e. Unable to hear verbal communication

ANS: B

Internal distractions include hunger, pain, anger, and tiredness. Internal distractions are barriers to communication

REF: p. 38 OBJ: 6 TOP: Communication: Barriers
MSC: CAAHEP: V.C.4, ABHES: 5.h

6. What is a way to overcome environmental distractions that impact communication?
- a. Help make the patient comfortable.
 - b. Use screen magnifiers and large-print materials.
 - c. Use “functioning age” appropriate materials.
 - d. Provide privacy for patients.
 - e. Use pictures and models.

ANS: D

To overcome environmental distractions, provide privacy for patients. Talk with patients in a quiet room with the door closed. Make sure the room temperature is comfortable.

REF: p. 38 OBJ: 6 TOP: Communication: Barriers
MSC: CAAHEP: V.C.4, ABHES: 5.h

7. A patient has a hearing impairment. What technique should the medical assistant use to help overcome this communication barrier?
- a. Talk with the patient in a quiet room with the door closed.
 - b. Use audio recordings.
 - c. Use print materials and written instructions.
 - d. Use videos with captions.

e. Use print materials and written instructions and use videos with captions.

ANS: E

To overcome hearing impairment barriers, use print materials and written instructions. Use videos with captions. Have text telephones (TTYs) available. Use a sign language interpreter.

REF: p. 38 OBJ: 6 TOP: Communication: Barriers
MSC: CAAHEP: V.C.4, ABHES: 5.h

8. A patient is illiterate. What strategy can the medical assistant use to overcome this barrier to communication?
- Use print materials and written instructions.
 - Help make the patient comfortable.
 - Use pictures and models.
 - Use "Functioning age" appropriate language and materials.
 - Use videos with captions.

ANS: C

To overcome an illiterate communication barrier, use pictures and models. Draw pictures and use simple language.

REF: p. 38 OBJ: 6 TOP: Communication: Barriers
MSC: CAAHEP: V.C.4, ABHES: 5.h

9. A medical assistant is working with a 2-year-old child. What stage of Erikson's psychosocial development is this patient in?
- Trust versus Mistrust
 - Industry versus Inferiority
 - Initiative versus Guilt
 - Autonomy versus Shame and Doubt
 - Identity versus Role Confusion

ANS: D

Children between 1.5 and 3 years are in the Autonomy versus Shame and Doubt stage.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Development Stages
MSC: CAAHEP: V.C.17.b, ABHES: 5.d

10. A medical assistant is working with a 10-year-old child. What stage of Erikson's psychosocial development is this patient in?
- Trust versus Mistrust
 - Industry versus Inferiority
 - Initiative versus Guilt
 - Autonomy versus Shame and Doubt
 - Identity versus Role Confusion

ANS: B

Children between 6 and 12 years are in the Industry versus Inferiority stage.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Development Stages
MSC: CAAHEP: V.C.17.b, ABHES: 5.d

11. A medical assistant is working with a 72-year-old adult. What stage of Erikson's psychosocial development is this patient in?
- Industry versus Inferiority
 - Generativity versus Stagnation
 - Identity versus Role Confusion
 - Ego Integrity versus Despair
 - Autonomy versus Shame and Doubt

ANS: D

Adults 60 years and older are in the Ego Integrity versus Despair stage.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Development Stages
MSC: CAAHEP: V.C.17.b, ABHES: 5.d

12. What communication strategy should a medical assistant use with a preschooler?
- Use engaging simple tools to communicate information (e.g., gaming software).
 - Provide privacy and independence.
 - Use short, simple sentences.
 - Use imitation, play, and role-playing.
 - Use short, simple sentences and use imitation, play, and role-playing.

ANS: E

For preschoolers use short, simple sentences. Encourage questions. Use imitation, play, and role-playing.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Development Stages
MSC: CAAHEP: V.C.17.b, ABHES: 5.d

13. What communication strategy should a medical assistant use with an adolescent?
- Provide privacy and independence.
 - Encourage responsible decision making.
 - Use engaging simple tools to communication information.
 - All are correct
 - Provide privacy and independence and encourage responsible decision making.

ANS: E

With adolescence, provide privacy and independence. Encourage responsible decision making. Encourage discussion and questions.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Development Stages
MSC: CAAHEP: V.C.17.b, ABHES: 5.d

14. This type of diversity pertains to the country where the person was born and holds citizenship.
- a. Culture
 - b. Race
 - c. Nationality
 - d. Ethnicity
 - e. Social factors

ANS: C

Nationality diversity pertains to the country where the person was born and holds citizenship.

REF: p. 31

OBJ: 2

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.18, ABHES: 5.i

15. This type of diversity is defined as general customs, norms, values, and beliefs held by a group of people.
- a. Culture
 - b. Race
 - c. Nationality
 - d. Ethnicity
 - e. Social factors

ANS: A

Cultural diversity includes general customs, norms, values, and beliefs held by a group of people.

REF: p. 31

OBJ: 2

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.18.a, ABHES: 5.i

16. This type of diversity is defined as a group of people who share a common ancestry, culture, religion, traditions, nationality, and language.
- a. Culture
 - b. Race
 - c. Nationality
 - d. Ethnicity
 - e. Social factors

ANS: D

Ethnic diversity is defined as a group of people who share a common ancestry, culture, religion, traditions, nationality, language, and so on.

REF: p. 31

OBJ: 2

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.18.c, ABHES: 5.i

17. This type of diversity is defined as all the ways a person is different from others, including religion and lifestyles.

- a. Ethnicity
- b. Social factors
- c. Nationality
- d. Race
- e. Culture

ANS: B

Social factors are defined as all the ways a person is different from others (e.g., lifestyle, religion, tastes, and preferences).

REF: p. 31

OBJ: 2

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.18.b, ABHES: 5.i

18. Sally attends church each week. She does not drink or smoke. These are examples of _____ diversity.

- a. ethnicity
- b. social factors
- c. race
- d. culture
- e. nationality

ANS: B

Social factors are defined as all the ways a person is different from others (e.g., lifestyle, religion, tastes, and preferences).

REF: p. 31

OBJ: 2

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.18.b, ABHES: 5.i

19. Stan states he is Polish. He grew up speaking Polish and loves Polish foods. He comes from a very traditional Polish family and plans on carrying on the traditions with his family. This is an example of _____ diversity.

- a. culture
- b. race
- c. nationality
- d. ethnicity
- e. social factors

ANS: D

Ethnic diversity is defined as a group of people who share a common ancestry, culture, religion, traditions, nationality, language, and so on.

REF: p. 31

OBJ: 2

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.18.c, ABHES: 5.i

20. Tim immigrated as a child to the United States. He has adapted to the U.S. customs. He likes to be on time and believes in the rights of a U.S. citizen. This is an example of _____ diversity.

- a. culture
- b. race
- c. nationality
- d. ethnicity
- e. social factors

ANS: A

Cultural diversity includes general customs, norms, values, and beliefs held by a group of people.

REF: p. 31 OBJ: 2

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.18.a, ABHES: 5.i

21. What are not types of nonverbal communication?

- a. Words
- b. Body language
- c. Body position
- d. Facial expression
- e. Eye contact

ANS: A

A type of communication that occurs through body language and expressive behaviors rather than with verbal or written words.

REF: p. 31 OBJ: 3

TOP: Communication: Verbal/Nonverbal

MSC: CAAHEP: V.C.2, ABHES: 5.h | CAAHEP: V.C.2, ABHES: 7.g

22. What is true regarding self-boundaries with communication?

- a. Discussions regarding relationships, politics, and religion are not appropriate for the workplace.
- b. People can be insulted if others swear or use religious names in inappropriate ways.
- c. Medical assistants can share personal issues and struggles to show the patient empathy.
- d. All are correct
- e. Discussions regarding relationships, politics, and religion are not appropriate for the workplace and people can be insulted if others swear or use religious names in inappropriate ways.

ANS: E

When we are in the healthcare environment, we need to remember that certain topics are inappropriate. Discussions regarding relationships, politics, religion, and other such topics are not appropriate for the workplace. Many people swear or use words that are insulting or degrading to others. Some people routinely use religious names (e.g., God) when they are surprised or upset. It is not appropriate for the medical assistant to share personal issues, struggles, life stories, or other personal intimate information.

REF: p. 41 OBJ: 7

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.11, ABHES: 5.h

23. What is incorrect regarding nonverbal communication?
- Rate refers to the speed at which the speaker talks.
 - Clarity refers to the quality of the voice.
 - Volume refers to the loudness of the speaker's voice.
 - Pitch refers to the emotion in the voice.
 - Intonation refers to the melodic pattern or the pitch variation.

ANS: D

Pitch refers to the highness or lowness of the voice. Tone refers to the emotion in the voice.

REF: p. 33 OBJ: 3 TOP: Communication: Verbal/Nonverbal
MSC: CAAHEP: V.C.2, ABHES: 7.g

24. What is true regarding the communication cycle?
- The sender creates the message.
 - Both the sender and the receiver must decode messages received.
 - The receiver creates feedback.
 - All are correct
 - The sender creates the message and the receiver creates feedback.

ANS: D

The sender creates the message. The receiver decodes the message. The receiver creates feedback. The sender decodes the feedback message.

REF: p. 33 OBJ: 4 TOP: Communication: Verbal/Nonverbal
MSC: CAAHEP: V.C.5, ABHES: 5.h

25. What is a type of verbal communication?
- Letters and emails
 - Phone messages
 - Oral communication
 - Online information
 - All are correct

ANS: E

Oral communication is a type of verbal communication. Oral communication means we talk with others and we listen to others. Written communication is a type of verbal communication. We create written messages for the receiver. Written communication includes:

- Written messages (e.g., phone messages)
- Letters and emails
- Online information and media

REF: p. 35 OBJ: 5 TOP: Communication: Verbal/Nonverbal
MSC: CAAHEP: V.C.1, ABHES: 7.g

26. What type of communicators avoid expressing one's feelings or opinions and allows others to infringe on one's rights?

- a. Aggressive communicator
- b. Passive-aggressive communicator
- c. Manipulative communicator
- d. Passive communicator
- e. Assertive communicator

ANS: D

Passive communicator—Avoids expressing feelings or opinions, fail to exert themselves, allow others to infringe on their rights, and tend to speak softly. They may feel depressed, resentful, or anxious because life seems out of their control.

REF: p. 35 OBJ: 4 TOP: Communication: Styles
 MSC: CAAHEP: V.C.14.c, ABHES: 7.g | CAAHEP: V.C.1, ABHES: 7.g

27. What type of communicators clearly state their needs and wants and use “I” statements and listen without interrupting?
- a. Aggressive communicators
 - b. Passive-aggressive communicators
 - c. Manipulative communicators
 - d. Passive communicators
 - e. Assertive communicators

ANS: E

Assertive communicators—Clearly state their needs and wants. They use “I” statements and listen without interrupting. They are relaxed, use good eye contact, feel connected with others, and stand up for their rights. They feel in control of their lives and are mature enough to address issues.

REF: p. 36 OBJ: 4 TOP: Communication: Styles
 MSC: CAAHEP: V.C.14.a, ABHES: 7.g | CAAHEP: V.C.1, ABHES: 7.g

28. What type of communicators try to dominate others, have poor listening skills, and use “you” statements?
- a. Aggressive communicators
 - b. Passive-aggressive communicators
 - c. Manipulative communicators
 - d. Passive communicators
 - e. Assertive communicators

ANS: A

Aggressive communicators—Try to dominate others; have low frustration toleration, criticize and attack others, have poor listening skills, and use “you” statements. This can cause them to be alienated from or feared by others.

REF: p. 36 OBJ: 4 TOP: Communication: Styles
 MSC: CAAHEP: V.C.14.b, ABHES: 7.g | CAAHEP: V.C.1, ABHES: 7.g

29. What type of communicators use soft voices, make no eye contact, and fidgets and cause others to feel exasperated and frustrated?
- a. Aggressive communicators

- b. Passive-aggressive communicators
- c. Manipulative communicators
- d. Passive communicators
- e. Assertive communicators

ANS: D

Passive communicators use soft voice, head down, fidgets, and no eye contact. Others may feel exasperated, frustrated, and feel they can take advantage of the person.

REF: p. 36 OBJ: 4 TOP: Communication: Styles
MSC: CAAHEP: V.C.14.c, ABHES: 7.g | CAAHEP: V.C.1, ABHES: 7.g

30. What type of communicators glare, use big, sharp, and fast gestures, and invade others' personal space intentionally causing others to feel afraid and hurt?
- a. Aggressive communicators
 - b. Passive-aggressive communicators
 - c. Manipulative communicators
 - d. Passive communicators
 - e. Assertive communicators

ANS: A

Aggressive communicators use—Low voices; big, sharp, and fast gestures; glare, frown, and invade others' personal space intentionally.

REF: p. 36 OBJ: 4 TOP: Communication: Styles
MSC: CAAHEP: V.C.14.b, ABHES: 7.g | CAAHEP: V.C.1, ABHES: 7.g

31. What type of communicators use medium pitch, speed, and volume of voice with good eye contact instilling trust in others?
- a. Aggressive communicators
 - b. Passive-aggressive communicators
 - c. Manipulative communicators
 - d. Passive communicators
 - e. Assertive communicators

ANS: E

Assertive communicators use—Medium pitch, speed, and volume of voice; good eye contact; and open posture and respectful of others. Others can trust the individual.

REF: p. 36 OBJ: 4 TOP: Communication: Styles
MSC: CAAHEP: V.C.14.a, ABHES: 7.g | CAAHEP: V.C.1, ABHES: 7.g

32. What is true regarding active listening?
- a. The most important therapeutic communication technique.
 - b. We fully concentrate on what is being said and how it is said.
 - c. The speaker can easily see if a person is actively listening.
 - d. All are correct
 - e. The most important therapeutic communication technique and we fully concentrate on what is being said and how it is said.

ANS: D

Active listening is the most important therapeutic communication technique. This skill takes time to master. Active listening means we fully concentrate on what is being said and how it is said. This is different from passively hearing what the speaker is saying and being distracted by our own thoughts. When a person is actively listening, the speaker can easily see it.

REF: p. 37 OBJ: 5 TOP: Communication: Active Listening
MSC: CAAHEP: V.C.1, ABHES: 5.h

33. This law requires healthcare providers to provide free effective communication to patients for an expanded group of disabilities.
- Civil Rights Act
 - HIPAA
 - ADA
 - ADAAA
 - HITECH

ANS: D

The Americans with Disability Act (ADA) requires all healthcare providers must provide free effective communication to patients (and companions) with disabilities. The Americans with Disabilities Act Amendments Act (ADAAA) expanded the definition of disabilities established in the ADA.

REF: p. 44 OBJ: 6 TOP: Law and Ethics: Acts and Legislation
MSC: CAAHEP: X.C.10.c, ABHES: 4.h

34. A person has come to terms with the fact her mother is dying. Using the Stages of Grief and Dying, what stage is this person in?
- Bargaining
 - Anger
 - Acceptance
 - Denial
 - Depression

ANS: C

When a person has come to terms with the situation, this person is in the acceptance stage of the Stages of Grief and Dying.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.c, ABHES: 5.b.2

35. Sam was diagnosed with stage 3 lung cancer. He feels sad and uncertain. He is not participating in his weekly cribbage game with his friends. Using the Stages of Grief and Dying, what stage is he in?
- Bargaining
 - Anger
 - Acceptance
 - Denial
 - Depression

ANS: E

When in the depression stage, a person feels sad, fearful, and uncertain. The person may not participate in normal activities.

REF: p. 40

OBJ: 6

TOP: Psychology/Cultural Awareness: Behavioral Theories

MSC: CAAHEP: V.C.17.c, ABHES: 5.b.2

36. What is true regarding Maslow's hierarchy of needs?
- The expanded theory includes eight levels of needs.
 - The deficiency needs need to be fulfilled to cope with life and survival.
 - Fulfillment of deficiency needs leads to instant short-term gratification.
 - The growth needs relate to making oneself a better person and brings long-lasting happiness.
 - All are correct

ANS: E

He expanded the theory to include eight levels of needs. Maslow believed that our human needs can be categorized into these eight levels. The "deficiency" needs consist of the four bottom levels. They are considered the coping behaviors. We must fulfill these needs to cope with life and survival. We all have similar needs, but when they are not met; it motivates us to get them met. Fulfillment of these needs leads to instant short-term gratification. The top four levels are "growth" needs. These levels relate to making ourselves a better person or being all that we can be. Achieving these levels brings long-lasting happiness.

REF: p. 41

OBJ: 8

TOP: Psychology/Cultural Awareness: Behavioral Theories

MSC: CAAHEP: V.C.17.a, ABHES: 5

37. Which of these needs is not a "deficiency" need according to Maslow?
- Physiological needs
 - Esteem needs
 - Self-actualization needs
 - Love and belongingness needs
 - Safety needs

ANS: C

Level 7 includes the self-actualization needs.

REF: p. 42

OBJ: 8

TOP: Psychology/Cultural Awareness: Behavioral Theories

MSC: CAAHEP: V.C.17.a, ABHES: 5

38. What is true regarding defense mechanisms?
- They are unconscious mental processes that protect people from anxiety, loss, conflict, or shame.
 - They include denial, repression, displacement, regression, and projection.
 - They may hide a variety of thoughts or feelings.

- d. All are correct
- e. They are unconscious mental processes that protect people from anxiety, loss, conflict, or shame and they include denial, repression, displacement, regression, and projection.

ANS: D

Defense mechanisms are unconscious mental processes that protect people from anxiety, loss, conflict, or shame. We use defense mechanisms and so do our patients and peers. People use defense mechanisms to protect themselves from situations or information they cannot manage psychologically. Defense mechanisms may hide a variety of thoughts or feelings, including anger, fear, sadness, despair, and helplessness. Examples of defense mechanisms include: denial, repression, displacement, regression, and projection.

REF: p. 42

OBJ: 9

TOP: Psychology/Cultural Awareness: Coping Mechanisms

MSC: CAAHEP: V.C.15, ABHES: 5.e

39. What is not an adaptive coping mechanism?

- a. Exercise
- b. Get plenty of sleep
- c. Talk and share with others
- d. Compliance and dependence
- e. Take breaks when you feel stressed

ANS: D

Adaptive coping mechanisms include:

- Eat healthy, well-balanced meals
- Exercise
- Drink water
- Get plenty of sleep
- Take breaks when you feel stressed
- Talk and share with others
- Get help when you need it

REF: p. 43

OBJ: 9

TOP: Psychology/Cultural Awareness: Coping Mechanisms

MSC: CAAHEP: V.C.15, ABHES: 5.e

40. Which of the following are maladaptive coping mechanism?

- a. Hostility and aggression
- b. Recognition-seeking
- c. Passive-aggressive behavior
- d. All are correct
- e. Hostility and aggression and passive-aggressive behavior

ANS: D

Maladaptive coping mechanisms include:

- Hostility, aggression, manipulation
- Recognition-seeking
- Passive-aggressive behavior

- Compliance, dependence
- Social withdrawal, isolation
- Denial, fantasy
- Drugs and alcohol use
- Gambling, shopping, risk-taking behaviors

REF: p. 43 OBJ: 9
 TOP: Psychology/Cultural Awareness: Coping Mechanisms
 MSC: CAAHEP: V.C.15, ABHES: 5.e

41. _____ is a condition that causes physical and/or emotion tension.
- Defense mechanism
 - Coping mechanism
 - Stress
 - Nonadaptive mechanism
 - Depression

ANS: C
 Stress is a condition that causes physical and/or emotional tension.

REF: p. 42 OBJ: 9
 TOP: Psychology/Cultural Awareness: Coping Mechanisms
 MSC: CAAHEP: V.C.15, ABHES: 5.e

42. Jess was diagnosed with breast cancer. She refuses to believe the diagnoses. Using the Stages of Grief and Dying, what stage is he in?
- Bargaining
 - Anger
 - Acceptance
 - Denial
 - Depression

ANS: D
 When in the denial stage, a person refuses to accept the fact (e.g., diagnosis or prognosis). This is a defense mechanism that allows the person to ignore what is happening.

REF: p. 40 OBJ: 6
 TOP: Psychology/Cultural Awareness: Behavioral Theories
 MSC: CAAHEP: V.C.17.c, ABHES: 5.b.2

43. Using the Stages of Grief and Dying, what stage is also a defense mechanism?
- Bargaining
 - Anger
 - Acceptance
 - Denial
 - Depression

ANS: D
 When in the denial stage, a person refuses to accept the fact (e.g., diagnosis or prognosis). This is a defense mechanism that allows the person to ignore what is happening.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.c, ABHES: 5.b.2

44. Which of these needs includes air, food, drink, shelter, and warmth?
- a. Physiological needs
 - b. Esteem needs
 - c. Self-actualization needs
 - d. Love and belongingness needs
 - e. Safety needs

ANS: A

Physiological needs include: air, food, drink, shelter, warmth, oxygen, sleep, and so on. We need these things to survive.

REF: p. 41 OBJ: 8
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

45. Which of these needs includes stability, security, and protection from the elements?
- a. Physiological needs
 - b. Esteem needs
 - c. Self-actualization needs
 - d. Love and belongingness needs
 - e. Safety needs

ANS: E

Safety needs include protection from the elements, security, order, law, stability, and so on. These needs relate to keeping us safe and secure.

REF: p. 41 OBJ: 8
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

46. Unmet _____ needs can lead to fear, stress, and anxiety.
- a. physiological
 - b. esteem
 - c. self-actualization
 - d. love and belongingness
 - e. safety

ANS: E

Safety needs include protection from the elements, security, order, law, stability, and so on. These needs relate to keeping us safe and secure. Unmet safety needs can lead to fear, stress, and anxiety.

REF: p. 41 OBJ: 8
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

47. Which of these needs includes knowledge, curiosity, and understanding?
- Cognitive needs
 - Esteem needs
 - Self-actualization needs
 - Aesthetic needs
 - Transcendence needs

ANS: A

Cognitive needs include knowledge, curiosity, understanding, and exploration. We are driven to learn more about something.

REF: p. 41 OBJ: 8
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

48. Unmet _____ needs can lead to feelings of isolation and depression
- physiological
 - esteem
 - self-actualization
 - love and belongingness
 - safety

ANS: D

Love and belongingness needs include friendship, intimacy, acceptance in a group, and receiving and giving affection and love. Unmet needs in this level can lead to feelings of isolation, loneliness, and depression. A person may feel anxious about going out in social situations if this need is not met.

REF: p. 41 OBJ: 8
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

49. A medical assistant provides a patient with a list of community resources for food and shelter. What need is the medical assistant helping the patient meet?
- physiological
 - esteem
 - self-actualization
 - love and belongingness
 - safety

ANS: A

A medical assistant can help a patient meet the deficiency needs in the following ways:

- *Physiological needs*: Provide community resources for basic needs.
- *Safety needs*: Provide domestic abuse hotline numbers and other community resources.
- *Love and belongingness needs*: Be positive and respectful. Have a caring manner when working with patients. Try to make a patient feel important.
- *Esteem needs*: Encourage independence and provide sincere complements.

REF: p. 42 OBJ: 8

TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

50. With this defense mechanism, a person simply forgets something that is bad or hurtful.
- Displacement
 - Repression
 - Suppression
 - Splitting
 - Denial

ANS: B

With repression, the person simply forgets something that is bad or hurtful.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e

51. With this defense mechanism, a person accuses someone else of having the feelings that he or she has.
- Displacement
 - Repression
 - Suppression
 - Splitting
 - Projection

ANS: E

With projection, the person accuses someone else of having the feelings that he or she has.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e

52. With this defense mechanism, a person is consciously aware of the information or feeling but refuses to admit it.
- Displacement
 - Repression
 - Suppression
 - Splitting
 - Projection

ANS: C

With suppression, the person is consciously aware of the information or feeling but refuses to admit it.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e

53. With this defense mechanism, a person comes up with various explanations to justify his or her response.

- a. Displacement
- b. Repression
- c. Rationalization
- d. Splitting
- e. Projection

ANS: C

With rationalization, the person comes up with various explanations to justify his or her response.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e

54. With this defense mechanism, a person expresses his or her feelings as the opposite of what he or she really feels.
- a. Displacement
 - b. Repression
 - c. Rationalization
 - d. Splitting
 - e. Reaction formation

ANS: E

With reaction formation, the person expresses his or her feelings as the opposite of what he or she really feels.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e

55. What is not an assertive behavior?
- a. Use good eye contact.
 - b. Put down other people.
 - c. Use a medium pitch, speed, and volume of voice.
 - d. Listen to others.
 - e. Accept compliments graciously.

ANS: B

Tips for being assertive include:

- Be assertive when you need to; not every situation requires it.
- Use good eye contact.
- Use a medium pitch, speed, and volume of voice.
- Be respectful of others.
- Clearly state your needs; use “I” statements.
- Listen to others.
- Accept compliments graciously and learn to handle criticism professionally.

REF: p. 44 OBJ: 4 TOP: Communication: Styles
MSC: CAAHEP: V.C.14.a, ABHES: 7.g | CAAHEP: V.C.1, ABHES: 7.g

56. How does a medical assistant demonstrate respect?

- a. Smile
- b. Pleasantly greet others
- c. Be sincere
- d. Be polite
- e. All are correct

ANS: E

Healthcare professionals need to show respect to others. This can be achieved with a smile, a pleasant greeting, and eye contact when first meeting the person. During the interaction, it is important to be courteous, sincere, polite, welcoming, and professional. Using a calm tone of voice, appropriate eye contact, and proper grammar without slang or generational terms also shows respect.

REF: p. 31

OBJ: 1

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.1, ABHES: 5.f

57. What federal law requires that all providers who accept federal funds for healthcare ensure equal access to services?

- a. Civil Rights Act
- b. HIPAA
- c. ADA
- d. ADAAA
- e. HITECH

ANS: A

Civil Rights Act requires all providers who accept federal funds for the healthcare provided must ensure equal access to services.

REF: p. 44

OBJ: 6

TOP: Law and Ethics: Acts and Legislation

MSC: CAAHEP: V.C.4, ABHES: 5.h

58. When coaching a patient who has a hearing impairment, which strategy should not be used?

- a. Write down the information.
- b. Speak slower.
- c. Focus your attention on the spouse or family member.
- d. Face the patient when talking.
- e. All are correct

ANS: C

Writing down the information, speaking slower, and facing the patient may be helpful.

REF: p. 43

OBJ: 6

TOP: Communication: Barriers

MSC: CAAHEP: V.C.4, ABHES: 5.h

59. Sarah becomes friends with a patient. What is not appropriate for a medical assistant to do?

- a. Share personal issues.
- b. Call the patient outside of the clinic.
- c. Accept the patient's request on social media.

- d. Share personal intimate information.
- e. All are correct

ANS: E

When working with patients, we need to keep our lives private. It is not appropriate for the medical assistant to:

- Share personal issues, struggles, life stories, or other personal intimate information.
- Contact the patient outside of the work environment.
- Befriend the patient on social media.
- Engage in a flirty or romantic conversation or relationship with the patient.
- Gossip and share what happens in the workplace with patients and others.

REF: p. 41

OBJ: 7

TOP: Psychology/Cultural Awareness: Interpersonal Skills/Diversity

MSC: CAAHEP: V.C.11, ABHES: 5.h

60. What is an example of a closed question or statement?
- a. What is the reason for your visit today?
 - b. How are you feeling?
 - c. Are you experiencing problems with your medication?
 - d. Please describe your pain.
 - e. What do you do for relaxation?

ANS: C

Closed (also called direct) questions ask for specific information. In many cases, this form of questioning limits the patient's answer to one or two words, including yes and no.

REF: p. 37

OBJ: 5

TOP: Communication: Therapeutic

MSC: CAAHEP: V.C.1, ABHES: 5.h

TRUE/FALSE

1. Using reflection statements helps to check what the patient is feeling instead of just assuming.

ANS: T

Reflection: Putting words to the person's emotional reaction, which acknowledges the person's feelings. Also helps to check what the person is feeling instead of just assuming. Shows empathy and helps build rapport.

REF: p. 38

OBJ: 5

TOP: Communication: Therapeutic

MSC: CAAHEP: V.C.1, ABHES: 5.h

2. Using clarification acknowledges the person's feelings.

ANS: F

Clarification: Allows the listener to get additional information. Reflection: Putting words to the person's emotional reaction, which acknowledges the person's feelings.

REF: p. 38 OBJ: 5 TOP: Communication: Therapeutic
MSC: CAAHEP: V.C.1, ABHES: 5.h

3. With paraphrasing, the medical assistant rewords the patient's statement to check the meaning and the interpretation.

ANS: T

Restatement or paraphrasing: Rewording or rephrasing a statement to check the meaning and interpretation. Also shows you are listening and understanding the speaker.

REF: p. 38 OBJ: 5 TOP: Communication: Therapeutic
MSC: CAAHEP: V.C.1, ABHES: 5.h

4. Environmental distractions and visually impairments are barriers to communication.

ANS: T

Barriers to communication include: environmental distractions, internal distractions, visually impaired, hearing impaired, intellectual disability, illiterate, non-English speaking, and emotional distractions.

REF: p. 38 OBJ: 6 TOP: Communication: Barriers
MSC: CAAHEP: V.C.4, ABHES: 5.h

5. With displacement, the person is consciously aware of the information or feeling but refuses to admit it.

ANS: F

With suppression, the person is consciously aware of the information or feeling but refuses to admit it.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e

6. With splitting, the person comes up with various explanations to justify her response.

ANS: F

With rationalization, the person comes up with various explanations to justify her response.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e

7. When in the depression stage, a person refuses to accept the fact.

ANS: F

When in the denial stage, a person refuses to accept the fact (e.g., diagnosis or prognosis). This is a defense mechanism that allows the person to ignore what is happening.

REF: p. 40 OBJ: 6
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.c, ABHES: 5.b.2

8. Self-actualization needs include air, food, drink, shelter, and warmth?

ANS: F

Physiological needs include: air, food, drink, shelter, warmth, oxygen, sleep, and so on. We need these things to survive.

REF: p. 41 OBJ: 8
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

9. Unmet safety needs can lead to fear, stress, and anxiety.

ANS: T

Safety needs include protection from the elements, security, order, law, stability, and so on. These needs relate to keeping us safe and secure. Unmet safety needs can lead to fear, stress, and anxiety.

REF: p. 41 OBJ: 8
TOP: Psychology/Cultural Awareness: Behavioral Theories
MSC: CAAHEP: V.C.17.a, ABHES: 5.e

10. Exercise and getting plenty of sleep are considered adaptive coping mechanisms.

ANS: T

Adaptive coping mechanisms include:

- Eat healthy, well-balance meals.
- Exercise.
- Drink water.
- Get plenty of sleep.
- Take breaks when you feel stressed.
- Talk and share with others.
- Get help when you need it.

REF: p. 43 OBJ: 9
TOP: Psychology/Cultural Awareness: Coping Mechanisms
MSC: CAAHEP: V.C.15, ABHES: 5.e