



Go to the Hospital or Stay Here? Having the Conversation

PRE-LEARNING ASSESSMENT GUIDE

Training format: In-person presentation and case scenario discussion or virtual learning.

PRE-TRAINING ASSESSMENT

This test should be taken prior to viewing the *Going to the Hospital or Stay Here? Having the Conversation* learning module.



Staff member:	Date:
Test Scorer:	Pre-Test Score:

True/False Questions	True	False
1. Pressure from family, nursing staff or physician to hospitalize the patient is a cause of patient transfers.	<input type="checkbox"/>	<input type="checkbox"/>
2. A resident decided to stay at her skilled nursing facility to have IV antibiotics to treat a urinary tract infection. This means that if her condition worsens, she cannot go to the hospital.	<input type="checkbox"/>	<input type="checkbox"/>

Multiple Choice Questions	A	B	C	D
3. "I listen to the doctor, listen to the nurses, and then I come to my own decision." This statement is an example of which type of bias? A. Anchoring bias B. Framing bias C. Confirmation bias D. Implicit bias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Which environmental factors and/or physical limitations can influence the patient experience in an ambulance ride to the emergency room? A. Sound B. Mentation C. Poor vision D. All of the above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Risks of going to the hospital include all of the following except: A. Skin breakdown B. Exposure to infections C. Access to complex tests D. Falling in an unfamiliar place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PRE-TRAINING ASSESSMENT, CONT'D.

Multiple Choice Questions	A	B	C	D
<p>6. To set the stage for a thoughtful discussion, do all of the following except:</p> <ul style="list-style-type: none"> A. Review what is known about the individual's goals and values B. Give time for response, questions and clarifications C. Find uninterrupted time for the discussion D. Lead with clearly stating your clinical recommendations 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>7. When are the BEST times to have discussions with patients and their representatives about hospitalization:</p> <ul style="list-style-type: none"> A. Before a crisis occurs, during care conferences, when a change of condition occurs B. When a change of condition occurs, right before discharge, during care conferences C. When a change of condition occurs, when discussing hospice or palliative care, at the time of discharge 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>8. What is the first step in an 8-Step Goals of Care Conversation?</p> <ul style="list-style-type: none"> A. Discuss health states the patient would find unacceptable B. Review previous discussions and documented wishes for care C. Inform the patient of the prognosis and anticipated outcomes for current treatment and assess for understanding D. Assess willingness to receive information and preferred role in decision-making 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>