# Answers to Questions in the Workbook, Chapter 14, Patient Safety and Restraint Alternatives

**Activity A MATCHING**

* 1. c
  2. f
  3. b
  4. a
  5. d
  6. e

**Activity B SHORT ANSWER**

Five situations that could cause a patient or resident to fall are:

* + 1. Pain and stiffness from arthritis
    2. Disorders that cause a person to shuffle their feet when they walk (such as a stroke or Parkinson disease)
    3. Clutter in walkways
    4. Poor vision
    5. Faulty wheelchairs, walkers, or canes

**Activity C MULTIPLE CHOICE**

1. d. All of the above

2. b. Report the accident immediately to the nurse and then fill out an incident (occurrence) report.

3. b. Measure the temperature of water with a bath thermometer before bathing the patient or a resident

**Activity D SHORT ANSWER**

An *accident* is an unexpected, unintended event that has the potential to cause bodily injury. An example of an accident would be if a person falls.

An *incident* is an occurrence that is considered unusual, undesired, or out of the ordinary, and that disrupts the normal routine for the patient or resident, the health care facility, or both. An example of an incident that is not necessarily an accident would be if a resident takes another resident’s favorite robe and refuses to return it, causing an argument.

**Activity E TRUE OR FALSE**

1. F. BOTH OLDER people AND children are at risk for accidental poisoning.

2. F. FALLS are the leading cause of accidental deaths among older people.

3. F. Before assisting a person with a reduced sense of touch with bathing, always check the temperature of the water by using a bath thermometer.

4. T

5. T

**Activity F MATCHING**

1. c

2. a

3. b

**Activity G MATCHING**

1. c

2. a

3. d

4. b

**Activity H SHORT ANSWER**

a. Long or loose clothing (such as a robe) or shoes that provide inadequate foot support or have slippery soles could lead to tripping.

b. Malfunctioning or broken equipment increases a person’s risk for accidents.

c. Keeping the bed in the lowest position minimizes the distance from the bed to the floor, should the patient or resident fall out of bed.

d. A person could easily trip over clutter in their path. Removal of obstructions is an easy way to minimize falls.

e. The nursing assistant’s observations (for example, that a person is having trouble with mobility or seems disoriented) will help the nurse to take action to minimize the person’s risk of falling.

f. It is often helpful to place a confused person close to the nurses’ station, where they can be observed and they can, in turn, watch others and not feel left alone. This will minimize the chance that the person will attempt to get up on their own to look for company, which in turn, minimizes their risk of falling.

**Activity I MULTIPLE CHOICE**

1. a. The restraint should be removed every 2 hours, for a total of 10 minutes.

2. d. For staff convenience

3. b. To provide care for the patient or a resident while they are in a restraint

4. b. A mitt restraint

5. b. The restrained person’s arm is cool to the touch and pale or blue

**Activity J SHORT ANSWER**

This knot is called as quick-release knot. It is used to secure a restraint because quick-release knot, or slip knot, will hold tightly if the restrained person pulls against it, but can be undone quickly by pulling on its “tails.” The use of a quick-release knot will allow you to free a person from a restraint quickly in the event of an emergency.

**Activity K NAME THE RESTRAINT**

1. Vest restraint
2. Jacket restraint
3. Wrist restraint
4. Mitt restraint
5. Lap restraint

**Activity L SHORT ANSWER**

a. Putting the vest on backward can cause the person to strangle if they slide down against the improperly placed restraint, because the back of the restraint is higher than the front.

b. A restraint that is applied too tightly can lead to poor blood flow, which in turn can lead to permanent tissue or nerve damage.

c. Pneumonia, pressure ulcers, and blood clots (complications of immobility) can occur if a person is left in a restraint for too long. In addition, the person’s quality of life will suffer.

d. Incontinence (an inability to control one’s bowel, bladder, or both) can occur if a person is not taken to the bathroom regularly.

e. Strangulation can occur if a person falls out of bed while wearing a restraint.

**Activity M SHORT ANSWER**

Four things a nursing assistant can do to eliminate or reduce the need for restraints are:

1. Provide an environment in which the person feels safe and secure.

2. Provide frequent attention to the person’s physical needs.

3. Explain procedures and reassure the person.

4. Ask family members, volunteers, or other residents of the facility to help by providing companionship for the person.