1. The role of the certified wound nurse includes:
   a. doing all of the wound assessments for the nurses
   b. planning the wound care without the input of other clinicians
   c. reviewing the specifics regarding hospital policy, protocol and formulary related to skin health
   d. doing all wound care for the other nurses because they think wound care is heavy, laborious and time-consuming work

2. Hospital-acquired pressure ulcers are:
   a. not usually infected
   b. all full thickness ulcers
   c. not reimbursable by CMS
   d. may decrease length of stay and cost of care

3. A dry wound should be dressed with:
   a. an absorptive dressing
   b. a clear, adhesive dressing
   c. a moist, non-adherent dressing
   d. saline, wet-to-dry dressings

4. A thorough skin assessment includes:
   a. not involving the patient’s family
   b. a precursory peek under the sheets
   c. removing and/or repositioning devices
   d. asking the patient if he or she has any wounds

5. Assessing all aspect of the skin upon admission:
   a. is considered to be safe and comprehensive nursing care
   b. should not be done because it is laborious and time-consuming
   c. will not give you an idea of what dressings need to be applied
   d. will not assist in documentation of any skin breakdown that occurred prior to admission

6. All of the following statements describe appropriate skin care regarding medical devices EXCEPT:
   a. They should remain in place for fear of malpractice litigation
   b. They may trap heat and cause pressure
   c. They include such items as compression stockings, nasal cannulas and blood pressure cuffs.
   d. They include items such as compression stockings, nasal cannulas and blood pressure cuffs.
   e. strongly disagree

7. Educating patients and families about the importance of a thorough skin assessment will:
   a. belabor the assessment process
   b. decrease awareness and safety
   c. increase anxiety related to hospital-acquired conditions
   d. build partnerships in safe care

8. Darkly pigmented skin tones:
   a. require visual assessment
   b. require both a visual and tactile assessment
   c. do not necessitate any change in assessment technique
   d. will display obvious changes in skin integrity if compromised

9. The skin assessment should be done:
   a. by peeking under the sheets
   b. when the wound care nurse can do it
   c. in a systematic approach, from the top and working your way down
   d. without taking any bandages off because the doctor needs to look at any wounds

10. Thorough documentation will:
    a. give the reader a clear picture of the patient’s skin status
    b. be minimized if photos are incorporated
    c. increase risk of malpractice litigation
    d. detract from notes recorded on the body outline

**Evaluation**

1. I can identify the four facets of safe skin care.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

2. I can describe the importance of open communication and education with patients and families.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

3. I can discuss the rationales for removing dressings upon admission and applying simple dressings prior to formal wound care orders.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

4. The objectives relate to the overall goal of the article.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

5. The article is well-written and logically organized, and defines terms adequately.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

**Skin & Wound Care**

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1. A B C D E
2. A B C D E
3. A B C D E
4. A B C D E
5. A B C D E

**EVALUATION**

1. A B C D E
2. A B C D E
3. A B C D E
4. A B C D E
5. A B C D E

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