

# Early: Physical Dysfunction Practice Skills for the Occupational Therapy Assistant, 3rd Edition

## Chapter 2: The Disability Experience and the Therapeutic Process

### Test Bank

#### MULTIPLE CHOICE

1. An OTA working in a physical rehabilitation setting should be aware that the focus of occupational therapy should address:
1. Physical needs related to specific injuries.
  2. Physical needs that relate directly to discharge planning.
  3. Physical needs related to performing occupational roles.
  4. Physical, psychological, social, and spiritual needs.

ANS: 4 PTS: 1 REF: Page Number: 28

2. An OTA is working with a person who was training to compete in the Olympic games and has a C7 spinal cord injury. The individual is refusing to participate in therapy. He is experiencing a loss of:
1. Valued goals.
  2. Independence in ADL.
  3. Social support.
  4. Physical stamina.

ANS: 1 PTS: 1 REF: Page Number: 28-29

3. An OTA is working with a young male who lost his leg in a car accident. Despite his limitations, he is a member of his high school snow boarding team and plans to resume surfing. This individual would be described as having a:
1. Strong sense of being in control of his life.
  2. Strong family support system.
  3. Strong social support system.
  4. Strong commitment to form habits.

ANS: 1 PTS: 1 REF: Page Number: 29

4. An OTA is working with a person who has lost his ability to verbally communicate and is refusing to use a communication system while attending college classes. This individual may be experiencing:
1. A lack of psychological support from health care workers.
  2. Feeling different compared with his pre-morbid self.
  3. Feeling as though he has lost his personal identity.
  4. A feeling of dependence on others.

ANS: 2 PTS: 1 REF: Page Number: 29

5. An OTA is working with a person who became paralyzed after falling in a climbing accident. Intervention that aids in psychosocial adjustment should be based on:
1. Characteristics of persons with the same disability.
  2. The patient's reactions to the circumstances.
  3. Characteristics of persons who have the same severity of the same disability.
  4. The patient's reaction to the attitude of others toward disability.

ANS: 2 PTS: 1 REF: Page Number: 31

6. An OTA is working in an assisted living facility and recently implemented a residents council so that residents can provide input related to planning outings, visiting hours, and meals. This council is best described as:
1. A way to equalize residents' status at the facility and reduce prejudices.
  2. A way for the OTA to take a leadership role with the residents.
  3. A way for the residents to demonstrate their role at the facility to their families.
  4. A way for the residents and the OTA to engage in a teacher-student relationship.

ANS: 1 PTS: 1 REF: Page Number: 33

7. An OTA is working with a patient who is displaying anger about the cause of his disability toward his family and members of the health care team. The OTA should:
1. Talk with the patient about the negative effects the behavior is having on others.
  2. Ask another member of the health care team with psychiatric training to talk to the patient.
  3. Discuss the behavior with family members to find out why the patient is being mean.
  4. Ask another member of the health care team to talk to the family about the causes of the behavior.

ANS: 1 PTS: 1 REF: Page Number: 36

8. An OTA is working with a person who for several weeks has depended on the OTA to solve problems and is dependent in ADL. The OTA should:
1. Ask the occupational therapist to work with this person.
  2. Maintain a balance between assistance and control to facilitate self-help.
  3. Teach the person's caregiver how to assist the person and not push the person at this time.
  4. Allow the dependent behavior because the person may be depressed.

ANS: 2 PTS: 1 REF: Page Number: 36

9. An OTA is working with a person who has been burned and is concerned about returning to work as a tollbooth operator. The OTA should:
1. Suggest the person look for different employment.
  2. Teach the person relaxation techniques.
  3. Suggest that the person join a support group for persons who have been burned.
  4. Use fantasy by role-playing the situation.

ANS: 4 PTS: 1 REF: Page Number: 37

10. An OTA is working with a person who has been working hard to achieve her goals and now is feeling as though she is ready to “give up the fight.” The OTA should:
1. Talk with the person about depression and make a referral to a psychologist.
  2. Ask family members to talk to the person and provide encouragement.
  3. Expose the person to situations in which she can observe persons with disabilities who have been successful in overcoming limitations.
  4. Point out the gains she has made and encourage her to continue therapy.

ANS: 3 PTS: 1 REF: Page Number: 39

11. An OTA is working with a person who is experiencing stress related to adjusting to a physical disability. The OTA should:
1. Refer the person to a relaxation group.
  2. Find out how the person managed stress in the past and use those strategies.
  3. Refer the person to a psychologist for appropriate medications.
  4. Persuade the person to take on new roles.

ANS: 2 PTS: 1 REF: Page Number: 39

12. An OTA is working with an individual who became disabled after being shot in a robbery where a grocery clerk was shot and killed. The OTA frequently is late to treatment sessions and asks others to provide treatment. The OTA should FIRST:
1. Discuss the situation at the next team meeting with the psychologist.
  2. Transfer the individual to another therapist’s caseload.
  3. Continue treating the individual as if there is no problem.
  4. Admit adverse reactions and seek counseling with a peer or counselor.

ANS: 4 PTS: 1 REF: Page Number: 41

13. An OTA is working with a person who expresses fear and a sense of loss and is worried about returning home and not being able to prepare meals for her family. The OTA should:
1. Tell the person, “You do much better than you give yourself credit for.”
  2. Be overly cheerful when working with the person.
  3. Encourage the person to express her anger so that she realizes it is permissible and acceptable.
  4. Refer the person to outpatient group therapy.

ANS: 3 PTS: 1 REF: Page Number: 41