

Flex Therapist CEUs

Communicating with Geriatric Patients

1. Effective practitioner-patient communication benefits include ALL except:

- A. Expression of greater satisfaction
 - B. Patients more likely to adhere to treatment
 - C. More likelihood of malpractice suits being brought on
-

2. Stereotypes about aging and old age can lead patients and health professionals alike to dismiss or minimize problems as an inevitable part of aging.

- A. True
 - B. False
-

3. Effective communication with older patient populations involve:

- A. Letting older patients know that you welcome their questions and participation.
 - B. Encouraging older adults to voice their concerns
 - C. Being alert to barriers to communication about symptoms, such as fears about loss of independence or costs of diagnostic tests.
 - D. Expecting those in the baby boom generation to be more active participants in their health care.
 - E. All of the above
-

4. What are things that can be done to manage the difficulties caused by visual deficits:

- A. Make sure that handwritten instructions are clear
 - B. Use ornate & decorative fonts
 - C. Make sure there is adequate lighting, including sufficient light on your face
 - D. all of the above
 - E. a and c
-

5. All of the following are ways to better establish rapport & understand the patient EXCEPT:

- A. Begin the interview with a few friendly questions not directly related to health
 - B. Always address the patient by their first name
 - C. Don't rush, and try not to interrupt; speak slowly and give older patients a few extra minutes to talk about their concerns
 - D. Use active listening skills
 - E. Avoid jargon, use common language, and ask if clarification is needed, such as writing something down.
-

6. Which of the following is not an efficient strategy to obtain the medical history:

- A. Try to have the patient tell his or her story multiple times
 - B. If feasible, try to gather preliminary data before the session
 - C. Sit and face the patient at eye level
 - D. Make greater use of yes-or-no questions or simple choice questions if the patient has trouble with open-ended questions
-

7. Knowing an older patient's usual level of function and any recent significant changes to that are fundamental to:

- A. Providing appropriate health care
 - B. Influencing suitable treatment regimens
 - C. None of the above
 - D. a and b
-

8. All of the following are benefits of a regular exercise program for the elderly EXCEPT?

- A. Decreased risk of cardiovascular disease
 - B. Decreased chances for a stroke
 - C. Reducing risk of hypertension
 - D. Reducing risk of brain cancer
 - E. Helping with reducing osteoporosis
-

9. There are several ways to encourage older patients to exercise. Which does not belong on this list:

- A. Help patients set realistic goals
 - B. Inform them that exercising will allow them to eat more junk food
 - C. Refer patients to community resources such as Mall Walking groups
 - D. Let them know that regular exercise is essential for healthy aging
-

10. Which of the following statements is false regarding exercise in the older population?

- A. Moderate exercise was effective at reducing stress and sleep problems in older women caring for a family member with dementia.
 - B. Older people who exercise moderately are able to fall asleep quickly, sleep for longer periods, and get better quality of sleep.
 - C. Researchers found that exercise, which can improve balance, reduced falls among older people by 33 percent.
 - D. All of the above are true statements
-

11. Topics to approach concerns regarding the use of drugs and alcohol include:

- A. Alcohol and other drugs can increase the side effects of medication
 - B. Some medical conditions can become more complicated as a result of alcohol and other drug use
 - C. Alcohol and other drugs can reduce the medicine's effectiveness
 - D. All of the above
-

12. Approximately 80 percent of older adults have at least one chronic disease, and of those, 50 percent have at least two chronic conditions.

- A. True
 - B. False
-

13. Tools to assist patients with chronic conditions include all of the following, EXCEPT:

- A. Encourage the patient and caregivers to take a passive role in managing a chronic problem
 - B. Educate the patient on their medical condition and how to manage it
 - C. Provide a clear explanation of the diagnoses
 - D. Develop and communicate treatment plans with the patient's input and consent
-

14. Communications experts suggest that you start by saying "I'm sorry..." when delivering bad news to a patient.

- A. True
 - B. False
-

15. Understanding how different cultures view health care helps you to tailor questions and treatment plans to the patient's needs.

- A. True
 - B. False
-

16. Which of the following are reasons to use a professional interpreter rather than a family member:

- A. A professional interpreter increases revenue
 - B. Family members may be unable to interpret medical terminology
 - C. A family member may find it difficult to relay bad news
 - D. b and c
-

17. When does a family caregiver have legal authority to make care decisions:

- A. When the patient orally states the caregiver has authority
- B. If the family caregiver is present, they automatically have legal authority
- C. If the family caregiver has been named the health care agent or proxy

D. None of the above

18. Which of the following are effective tools for communicating with a confused patient:

- A. If the patient hears you, but does not understand you, rephrase your statement
 - B. Use simple, direct wording. Present one question, instruction or statement at a time
 - C. Speak distinctly and at a natural rate of speed. Resist the temptation to speak loudly
 - D. All of the above
-

Copyright © 2025 Flex Therapist CEUs

Visit us at <https://www.flextherapistceus.com>